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ABSTRACT

The Adoption and Safe Families Act (ASFA) of 1997 was intended to increase the safety of children, promote adoption and other permanency options for children, and support fragile families. Although elements of ASFA were viewed as positive, child welfare administrators, practitioners, and researchers expressed concern that ASFA implementation could disproportionately affect children and families of color. To address these concerns, the Child Welfare League of American (CWLA) conducted a forum to examine the impact of the Act on children and families of color and inform the larger national agenda concerned with improving supports and services for this population. This book summarizes the plenary presentations on: (1) the strengths and challenges of families and communities of color; and (2) the Adoption and Safe Families Act intent, major provisions, promises, and concerns. Additional summaries are provided for working group discussions related to front-loading services, kinship care, adoption, and youth-in-care. Among the findings, it was noted that ASFA permanency timelines, its strong focus on legal permanency, and narrow view of "family" were insufficiently flexible and culturally inconsistent for families of color. Recommendations to strengthen supports and services for children and families of color complete the book. A list of conference presenters and CWLA staff as well as contact information is included. (KB)

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on Children and Families of Color

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Proceedings of a Forum

NOVEMBER 2000

Child Welfare League of America

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THE IMPACT OF ASFA

on Children and Families of Color

Proceedings of a Forum

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Child Welfare League of America
Washington, DC

The Child Welfare League of America is the nation's oldest and largest membership-based child welfare organization. We are committed to engaging people everywhere in promoting the well-being of children, youth, and their families, and protecting every child from harm.

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Conference Goals

— *To learn about and frame questions for further exploration regarding the impact of the Adoption and Safe Families Act on children and families of color.*

— *To inform the larger national agenda concerned with improving supports and services for children and families of color.*

INTRODUCTION

On November 9, 1997, President Clinton signed into law the Adoption and Safe Families Act (ASFA) of 1997 (P.L. 105-89). This legislation is intended to increase the safety of children, to promote adoption and other permanency options for children, and to support fragile families. It is the first major legislation to address permanency for children in need since the Adoption Assistance and Child Welfare Act (P.L. 96-272) was enacted in 1980.

The law aims to reduce the time children spend in foster care by

- Shortening the time frame for permanency planning from 18 months to 12 months,
- Rewarding states that increase adoptions over previous years with "adoption bonuses," and
- Requiring filing of a petition to terminate parental rights (to make children available for adoption) when a child has been in foster care for 15 of the last 22 months. The law permits certain exceptions.

Although elements of ASFA were viewed as positive, child welfare administrators, practitioners, and researchers expressed concern that ASFA implementation could disproportionately impact children and families of color. Their concerns included the following:

- Because racism is a fact of life in American society, and racial profiling has been demonstrated to exist in numerous areas, families of color may be subjected to disproportionate scrutiny and be reported more often than other families.
- Because children of color enter the child welfare system in disproportionate numbers, any unintended negative consequences of ASFA implementation will fall more heavily on them and their families.

- Because the supportive services that help families meet conditions for reunification are not equally available or accessible across neighborhoods and jurisdictions, and many families of color live in poor or rural areas, these families may be less likely to obtain help.

- Because families of color are more likely than other families to be poor, and because the stress of poverty affects parents' ability to comply promptly with expectations, this group may be more subject to termination of parental rights than other groups.

- Because families of color include members of diverse ethnic and cultural groups, and not all child welfare workers are adequately equipped to work cross-culturally, some families of color may experience confusion, intimidation, or even the loss of their children unnecessarily.

To address these concerns, the Child Welfare League of America (CWLA) conducted a forum, Assessing the Impact of the Adoption and Safe Families Act (ASFA) on Children and Families of Color: Early Observations and Recommendations, on November 13–14, 2000, in Chicago, Illinois. This invitational forum, supported by the Ford Foundation, represented a first opportunity to have a national discussion about ASFA and children and families of color, to explore the concerns and the potential benefits of ASFA, and to shape the larger national agenda concerned with improving supports and services for children and families of color. At the forum, a number of important questions were explored, such as:

- Do the concerns some child welfare practitioners and advocates are expressing about ASFA reflect current experience with ASFA or earlier, more generalized experience?

  — Is there any quantitative evidence, at this stage of implementation, that families of color are being differently affected, either positively or negatively?

  — Is there qualitative evidence of differential effects, seen in a pattern of reports and anecdotes?

- Are the mandates resulting from ASFA being understood and implemented evenly across the United States?

- How do agencies understand and implement related mandates, such as the Multi-Ethnic Placement Act (MEPA)/Interethnic Adoption Provisions (IEPA), Indian Child Welfare Act (ICWA), and the Foster Care Independence Act of 1999, and how do these affect the process guided

by ASFA implementation for children and families of color? What evidence for their effect is currently available?

- Are prevention and support services being made available to the families reported to child protective services and to families whose children are in care?
- Are the services families receive appropriate to their needs?
- Are services beginning promptly and being maintained long enough to address family needs and produce lasting change?
- Are services culturally appropriate for all the families who need them? Are workers available who speak clients' languages and understand their cultural contexts?
- What services not provided by child welfare agencies, such as service advocacy and legal representation, are most essential for families of color?
- Are families who need them receiving these complementary services?
- Is the increased use of kinship care creating a separate set of expectations and outcomes for children of color? If so, are these beneficial or detrimental?
- What steps must be taken to ensure that families of color are helped and not harmed by their contact with the system?
- What promising program approaches have emerged as states and localities have gone about implementing ASFA?
- What policy changes must be made, at the national, state, and local levels, before these steps can be taken?
- What additional questions must be asked to inform this exploration?

In planning the forum, project staff compiled a list of invitees who could make valuable contributions to this discussion. The list included state and county child welfare directors; private child welfare agency directors and program managers; CWLA National Advisory Committee and Regional Committee chairs; advocates, including legal advocates and organizations representing people of color; directors of national resource centers; judges, scholars, and researchers; youth in care; parents of children in care; caregivers; program officers from foundations; and participants who attended regional forums as part of CWLA's Renewing Our Commitment

to Permanency for Children project. From the list of possible attendees, 225 invitations were issued to selected participants. Invited participants were asked to suggest reports, data, or promising programs related to ASFA and children and families of color.

One hundred participants attended the forum. The first day began with presentations on the strengths of families and communities of color from African American, American Indian, and Latino viewpoints. Next, researchers and agency directors presented data on what we know and do not know about children of color in the child welfare system. Continuing the theme of assessing how children and families of color are faring, a young adult spoke about his earlier experience as a youth in the foster care system. Also, a mother whose children were in care spoke about her experience with the child welfare system. The first day ended with two presentations on the intent, major provisions, promises, and concerns of ASFA.

On the second day, participants were asked to select one working group from four service areas: front-loading services, kinship care, adoption, and youth in care. The groups met concurrently and focused on key service areas and provisions of ASFA. Each group was given the tasks of (1) examining early observations and findings specific to their service area; (2) discussing implementation challenges and successes; (3) sharing examples of effective policies, programs, and practices; and (4) developing recommendations for researchers, policymakers, agency administrators, courts, the U.S. Department of Health and Human Services (HHS), CWLA, and other national organizations. Each working group featured a guest panel and was facilitated by the CWLA Directors of Adoption, Foster Care, Kinship Care, and Residential Care and Youth Services (working jointly). In the afternoon, each working group presented its findings to the larger group, using overhead transparencies to summarize the discussion. Each group closed by making recommendations for improving law, policy, and practice in the respective service area.

This summary includes excerpts of plenary presentations, working group discussions, and recommendations to strengthen supports and services for children and families of color.

General Session and Keynote Presentation Summaries

The Strengths and Challenges of Families and Communities of Color

African American Families

Presenter: Robert Hill, Ph.D., Senior Researcher, Westat, Inc., Rockville, Maryland

I want to commend the Child Welfare League of America (CWLA) for beginning the discussion of the challenges related to the Adoption and Safe Families Act (ASFA) by looking at the strengths of communities of color. We usually talk about challenges and weaknesses. I contend that the only way to strengthen families is by building on their strengths. About 30 years ago, I wrote *The Strengths of Black Families* because I was very much concerned. Of course, in the early '70s, immediately after the Moynihan Report came out, we were concerned that the analyses of Black families were only focusing on their weaknesses. You cannot understand Black families if you focus only on their weaknesses, nor can you understand Black families if you focus only on their strengths. To understand Black families as a whole, you have to look at their weaknesses and their strengths, just as I can't understand you as an individual if I look only at your weaknesses or only at your strengths. That was a major reason I wrote the book.

Another reason was that, in any analysis of families of color, one sees all the bad statistics and then the story ends. I call that the "analysis that leads to paralysis." The reason you feel paralyzed is because you are told

everything that is wrong but not how to solve the problem. Yes, you do have to identify a problem. Yes, you do have to get all the bad statistics, but after you identify a problem, you have to go on to solutions. The major solutions to problems are the strengths. That is why you identify the strengths—to solve the problem. When you look at strengths, you say, "What can we build on? How can we empower people?" My original book focused on five strengths: achievement orientation, work orientation, flexible family roles, kinship bonds, and religious orientation. A number of other scholars identified those strengths, too. I tried to document those strengths by using national data.

Here, I want to focus on one of these strengths—kinship bonds—that has special relevance to the issues that we are talking about today. My second book, *Informal Adoption Among Black Families,* was published in 1977. At that time, many adoption agencies said they could not find adoptive foster parents or adoptive parents. I began to wonder, "How much are they looking in our various communities?" The agencies said, "We can't find them; we can't locate them." I said, "We have a lot of families that are informally adopting, that are doing it outside of your agencies. Have you looked at some of those families? Have you looked at whether they are capable of being adoptive parents?" When I looked at the description of these families, however, they went against the grain of many of those agencies. They were more likely to be low-income, not middle class. They were more likely to be single parents, not two parents. They were more likely to have children in the households; the agencies were looking for infertile couples. They were more likely to be older; the agencies were looking for younger couples. The agencies were screening out millions of families who wanted to take care of children because the families didn't fit the agencies' criteria. That was in the 1970s. Things have changed since then.

When I wrote *Informal Adoption*, kinship care was not yet recognized. Some things happened in the 1980s, however. One thing that happened in our inner cities was crack cocaine—they exported jobs and all the services and then imported guns, crack cocaine, and HIV/AIDS. The agencies couldn't find those traditional families that they were looking for in terms of foster care. Andrew Billingsley and I said, "Why don't you get relatives?" and the agencies said, "Relatives aren't interested in taking these kids." But somehow they found millions of them in the 1980s and 1990s, haven't they? In fact, they found so many that they had to create a new term—"kinship care."

Let me put that in context, because we're talking about strengths. According to Census Bureau data, one million Black children do not live with

either of their parents—about 200,000 are in the foster care system. Where are the remaining 800,000? They are in informal adoptive families. They are being raised by relatives. The government cannot seem to find homes for 200,000 children, but the Black extended families found homes for 800,000. Somehow, we say the 800,000 don't exist, but they do exist.

When we talk about some of these issues today, it is very important to note that when I talk about strengths, these are not strengths that have adapted to adversity. These are cultural strengths—strengths we had in Africa before we came here. These strengths are not unique to Blacks. These same strengths are in all groups, but in those groups they operate differently, because Blacks have different experiences. When I talk about cultural strengths, I am talking about empowering people by building on their cultural strengths. The kinship bond is a cultural strength.

It is interesting that social workers now say that, when you remove a child from a family, the first place you should look is for relatives. In the past, the first place you looked was nonrelatives. Now, however, we begin to find relatives. We say to relatives that they don't need to have much money. We want relatives to take the children, but we want them to do it for nothing. I find it very interesting when we deal with that issue because it still amazes me. Do the children who are cared for by relatives have fewer needs? Does documentation show that these children have fewer needs? I just described the families many of these children came from—homes with AIDS-infected adults and crack cocaine users. These children have more problems than most, so the relatives should get a bonus, not less money.

Relatives also provide continuity for the children. When we look at families that have grown informally, those families should be used as resources. Here are some examples of what these families are doing culturally.

Permanency

Our studies of children who are being reared by relatives show that many stay there for most of their lives. When they got there, they were not supposed to stay, but they ended up staying permanently. A very creative demonstration here in Illinois is a subsidized guardianship. As you know, a guardian is not supposed to get any money. If you are a guardian, you have completely cut yourself out of the system. But agencies say they have to give some subsidy to low-income people. So we have to give a subsidy but not an inadequate subsidy. This demonstration is giving subsidies equal to what a nonrelative foster parent would receive. That's creative; that's building on strengths. Another reason the demonstration is so good is Terry

Solomon of the African American Family Commission, which is making sure the program is culturally sensitive.

Westat, Inc., has also evaluated permanency in these programs. We interviewed the children who were being cared for by relatives in those households. We compared youth in guardianship with those who were in adoption. The youth in guardianship felt they were just as permanent and living there just as long as those who were adopted. We found no greater permanency among those who are adopted compared with those who are in guardianship.

Another aspect that we find very interesting is that these caregivers are older. These families have set up a system of successor guardianship. They have identified people who are prepared to step in if a person becomes ill or dies. That is automatic; that's a cultural situation. Now we want to encourage more agencies to set up successor guardianship. In other words, a younger person backs up the older person to care for the continuity of the family. That's cultural; that's building on cultural strengths.

Another relationship that is important to build on is godparents. Who is a godparent? A godparent is someone who says, "I will step in if something happens to your child." In our culture, godparents' names are not on a license or piece of paper; they are in our culture. Who says you can only have one godparent? We have a lot of godparents. The point is, if we are looking for people to take care of a child, and these people say, "I'm prepared to take care of the child," shouldn't they be approached first if you want to be culturally sensitive? That's what this culture does; our culture has godparents. It has people to step in to take care of our children, and we should build our policies on that. I want to know, when I look at ASFA, to what extent is it reinforcing these strengths? We have to look at that.

Safety

Let's look at safety with respect to kinship. We say we have to monitor these relatives because we are concerned about the child's safety. In the Illinois demonstration study, we asked the relatives we were monitoring, "How many took care of children before the agencies appeared?" We found that 60% percent took care of these children before the agencies appeared, and they took care of a lot of children, not just one. Another aspect of informal adoption is that these adults take in sibling groups. If we want to place sibling groups, look to the relatives. If they were abusive, they would have been on a list. They would not have been able to take care of the children now, would they? None of them were on the list. That is why they are taking care of the children you are now monitoring. Do you think they

did a good job before you appeared on the scene, but somehow they became incompetent when you appeared?

We have to understand their strengths. Yes, they need monitoring and they need support. One of my concerns about kinship care is that relatives are seen as a dumping ground. Many agencies say, "Well, they're relatives, we don't have to do anything for them." Therefore, they get no support services, and when they fail, the agencies say, "We knew relatives couldn't take care of them anyway." It becomes a self-fulfilling prophecy. They need support services.

Another issue related to safety is, Who calls the hotline? Relatives are frequent callers of hotlines. Relatives are the most concerned about safety of the children. If they call the hotline, shouldn't they also be given priority for taking care of the kids? At least be interviewed for that? Research shows the lowest rates of child abuse among children who are raised by relatives. These strengths exist, and we need to discuss to what extent the policies reinforce those strengths.

Finally, cultural continuity is a strength. Any policy that says you cannot give priority to the race and culture of the child is anticultural. Priority must be given to the culture and race of these children. The continuity they must have is functional to their development. It's interesting that, if you give children away to someone else, when they emancipate out of foster care, where do they go? Back to their parents or extended family—the people they should have been with all the time. The relatives are prepared to take care of them for free, not the state. After they turn 18, goodbye to their placements. They go out the door and back to relatives and extended family. That means something—this system—is not right. The cultural affinity is there. We have to talk about ways to reinforce and build on those strengths, to empower these youth. When we talk about assessment, we talk about risk assessments. But look at their strengths assessment, their assets, what they have. If you build on those, you empower them. The effective policies are those that reinforce cultural strengths of groups.

Native American Families

Presenter: Lorraine Brave, Community Resource Program Manager, Washington Department of Social and Health Services, Seattle, Washington

I'm bicultural—I'm not only Mohawk, I'm Italian. Being bicultural is interesting, because I have the lineage of being the oppressed and the oppres-

sor. Visiting Italy was an interesting experience, because Christopher Columbus actually died there in prison as a pirate and a murderer. In a foreign country, he was seen in the same way that Native American people see him—different than in this country where he is honored. It is always interesting to look at different perspectives of the same person, how we look at policy, and how we look at how we are treated. I have been lucky to travel a little. Although I am from New York, I went to the University of Utah. I lived there and in Alaska. I went to graduate school in Seattle, and I have also lived in Canada. One has many different experiences. When I was working in the late 1970s—looking at Indian child welfare issues before the Indian Child Welfare Act (ICWA) came about—I was one of the people very involved with the implementation of the act 20 years ago. Today, we have judges who still say, "I don't know anything about this." We still have caseworkers who say, "I don't believe in it." If we don't have a basis in ICWA, then ASFA will not make sense in how it works for Native people.

We keep going back to the same questions: How do we get back to the policies, the foundation, the one policy that we really have felt was the turning point for Native people? People often want to look at the past as discrimination against Native people. As many of you know, in the boarding school system, the policy was "kill the Indian, save the child." That was the written policy.

But some policies are not so old. One policy was that Native people did not have a choice—they were viewed as needing to assimilate. That policy resulted in the breakdown of the family through policy. In the 1950s—not so long ago—we had the Relocation Act that moved Native families across the country and separated families; they were forced to speak English and to leave their culture and their extended families behind. That was a billion-dollar effort. The intention was a good intention at that time—or so the policymakers thought. This was going to help Native people. Imagine if you—your immediate family—had to move away from your grandparents, your aunts and your uncles, and the people that you have known your whole life and were moved to different parts of the country. California was one of the first of seven relocation sites. That is why there are so many urban Native people in California. They got a one-way ticket. But what happened as that generation, and the generation of children who did not have contact with their families, tried to go back home when they were age 18 or 19 to try to find out who they were? That is the effect of the Relocation Act and also the boarding school system.

Look at the Termination Act of the 1960s. Tribes were terminated, so you were no longer Native. You weren't White, but you weren't Native

either, so what were you? When the time came for voting about the policy, some Native people thought it was absurd to say they would give up being Native. They didn't vote. But when it went back to Congress, it was said that those who didn't vote were for it, and tribes were terminated. These are the policies of our government.

Sometimes people say to me, "Why are Native people so distrusting? We're just trying to help." In our lifetimes, these policies were purposely put in place to break up the family and force assimilation. As a good intention, that was the "best thing" for us.

When you come to ASFA, I know that it is well-intentioned. I believe that Congress wanted to do a good thing. They did not, however, think about the effect it would have on Native people. They did not think individually what it would mean for tribes, and the work that we are doing, and how that would affect ICWA. When we look at what those foundations are, and we look at how we can complement ICWA with ASFA, I think that we can. I do think it takes a little work, and I think it takes some work with tribes.

Unfortunately, they use the term "adoption" rather than "permanency planning," because many tribes do not believe in adoption. You are always part of your family; you can never terminate your parents. They will always be your parents. But we do believe in permanency planning. We believe in a good guardianship; we believe in kinship. We have always had children placed with healthy members of the tribe and with family and relatives. We have always had that. We know that, no matter how much oppression there is or how much dysfunction in any society, some families always seem somehow to rise above it. They take in the kids; they are always there, whether it is Bosnia or wherever.

It is really interesting how we look at children that we say are "bad kids." They are those groups who as children were punished for speaking the language, those who went underground because it was against the law to speak their language, to even own a drum, own regalia. This was in the 1930s and 1940s—not so long ago. Those people in boarding school and those people who were considered the "bad kids" or the "rebels" are the ones who are the elders we honor today, because they are saving our culture and our people and our identity. They are the glue that is bringing us back together. There are some good things to say about those "bad kids." Maybe when we are in it, we cannot see the damage that the system is doing.

Certainly, we can work with ASFA, because we all want permanency planning. We know that is the best situation for our children, but we also know it is best if they are connected somehow with their families or their tribes.

The timeline is one of the things that we have concerns about. First, addiction to alcohol and drugs is in epidemic stages, certainly in the tribes. According to a study done a few years ago, Natives have more people who do not drink than any other minority group. We have addicted people, and we have abstinent people, and we have a few people who are social drinkers. I always like to cite that study. It is very positive that our communities are doing a real turnaround, so we have lots of sober, together people. Maybe they weren't that way when they were 25 or 15, but that has been another problem in getting families licensed. We know who those healthy people are in our community; maybe our young people—whatever their age was, whatever it was that they went through—have acted out in a way that hurts them now and keeps them from getting their foster care license. What happens now is that we have a lot of children who end up informally in these homes. Because they can't get licensed, when children end up in these homes, the families cannot get the resources they need. The very families who can most benefit from these resources cannot get them because of the licensing requirements. It is a big problem. Because we are in small communities, we know each other. We know who those leaders are. Although they may have been the "rebels" or the "bad children" in their youth, today they are leaders in our community.

When we look at timelines and addiction, the first step is that people have to admit they have a problem. Then, when the parent or parents say they will go to treatment, there is a waiting list. People cannot get into treatment; there are not enough resources.

When they do get treatment, whether it is a 60- or 90-day program, we know that the beginning stages are just detox; then they leave treatment. We could be talking about a one-year period already. Do you want to put children back into this home just because the parents are sober, or do you want to put children back in the home because the parents are ready to be parents? Thus, we are concerned that ASFA might force us to put children in homes when parents are not yet ready just because they are sober. The process is scary, because we know it takes time. It is a balancing act—it is good for children to be in a permanent placement, but we also know it hurts children more if we return them to their home and then have to remove them again.

As we look at cut-off times, the permanency plans governed by ICWA and by Title IV-E programs may conflict. Tribes have their own codes; however, when they have Title IV-E programs, they have to follow the guidelines of the state.

Another situation is cross-jurisdictional placement. I mentioned relocation earlier. More than 50% of Native people are not on reservations, for

whatever reason. Therefore, it is necessary to examine what all the resources are. Some tribes will intervene on behalf of a tribe in another state. This takes time, energy, and effort—way beyond what we ordinarily consider "reasonable efforts." Often, to non-Natives, it is too much work. We hope that people will look at this carefully, instead of just saying "I don't have the time, it's too much work" or giving other reasons for not doing good social work.

Transferring adoption procedures to tribal courts is a good way to work with ASFA and also work with those compelling reasons to not be within the timeline.

Look at preferred placement in ICWA. Sometimes people are involved who have never read ICWA. The number one mistake such people make is about what is meant when we say a child needs to be connected to a tribe or with their own extended family. It doesn't mean that a child is never placed with non-Natives. What the tribe is saying is, "We want to pick who that non-Native is, because we want to know whether their cultural competency exists." In a way, that only makes sense. Why would you let these non-Native state social workers, who may have no association with Native people, figure out who is culturally competent? Why wouldn't you want to let the tribe make that decision? Don't you think the tribe probably has the experience to know that? The interesting thing about cultural competence is the wide range of what people believe it is. The state does a lot of contracting out, for instance, in Washington State and in Oregon. Already services are limited for everybody—not only Native people. If you don't have culturally competent services, however, Native people are not going to come back, so then they have even fewer services.

One way to work this out would be to have some kind of certification. People would actually be honored for the work that they do for Indian child welfare, whether they're Native or not, by demonstrating that they have a true understanding of what that means. That would make a big difference, because some programs think cultural competency means, "I hired one Hispanic, one African American, and one Native American, so we are culturally competent." To illustrate what I mean, when I first got out of graduate school, I worked as a juvenile probation officer. Each officer had a specific geographic area. Indian people don't have a neighborhood—we are spread out all over. That meant I would have some Native people in my geographic area. Then I was a consultant for everybody else—70 other social workers who were probation officers and provided services. Sometimes they would say to me, "Do you want to take just this case?" I always said "Fine." I was really glad to help, but it always ended up that I had a

bigger caseload. I was consulting, too, so this was always more work. Looking back at that, why is it that when Native people do more work, we are not compensated for it? At the same time, we had a sexual abuse unit that worked specifically with those cases, had smaller caseloads, and were paid more. The same thing happens with the state. Yet states are showing that Indian child welfare cases take longer because you have to be able to work with all the tribes throughout the whole United States and Canada. Doing all that work up front does make a big difference, because more resources are then available. Therefore, why don't we have certification and people who are rewarded for doing work with Indian child welfare cases? We have a lot of Native staff, but workers decide they don't want to be in the Indian child welfare unit because of the amount of extra work. They would rather work in a general unit. If we are going to determine how we can work with private agencies and with the tribes, then ASFA certainly can work in a good way.

When you look at individual tribes—rather than making general statements about Natives—some tribes are amazing. The kinds of work they do, the wraparound services, the jurisdictional work they do, and how they intervene are all just amazing. Some tribes, however, have only two workers—one does all the social services, and one does Indian child welfare. They can never leave to go to training, because they only have two workers, and they have to do everything.

We could learn a lot from each other. Native Americans have knowledge of the issues, and we can share a lot. Like the states, we have long-term practical experience in how we work with children in foster care. We need to get together and share this more, rather than struggling separately.

Other conflicts sometimes come about—where we could all be learning—in the different ways we use words. We all speak English, but sometimes what we are saying has different meanings. Even the interpretation of what an "Indian" child is, is interesting. Depending on the state you are in and depending on the tribe, the codes are different and the laws are different about enrollment. A person could be from four different tribes but not have enough "blood quantum" to be enrolled in even one tribe. In Washington State, we have a tribal-state agreement that talks about "membership." Even if you are not enrollable as a member of a tribe, you still are provided Native services and are able to work within the Native community. This has led to a big conflict. There is concern that some of these children are not, by law, being seen as Native Americans, so Native people are very upset. They are saying, "Once again, we are the Native people. We know who our membership is. Why is someone in the state, a non-Native who makes policy, trying to decide who Native children are and who should get the services?"

This is a classic, prime example of differences in language. In a meeting I attended, we talked about equity. When the state representatives talked about equity, they meant all tribes getting the same amount of money. When the tribes talked about equity, they meant the tribal social workers making as much money as the state social workers. Both groups in this meeting were saying "Yeah! Yeah! Equity!" But when they left, they realized each group meant something completely different. People were mad at each other. Sometimes we have to clarify what we mean. When we look at adoption and what that means, we all believe in permanency planning, and that is a good thing. We do want equity even though it means different things to us.

One good thing is that, when we look at strengths, child protective services has often taken the lead. If you have 35 cases, you are not so worried about the cases where someone is placed somewhere and is safe. That has been a problem, and then those children fall through the cracks. The law pushes us not to forget—and we don't really forget—it forces us to plan for this population, and that's a good thing. We know we have a certain amount of time to do something. In Washington State, each region created new positions to troubleshoot and help, so that's a good thing. Through ASFA, we have new positions helping workers to do good practice. It also changed the way we do our individualized service plans—what we report to the court and what we look at. ASFA has changed the way we look at cases. Now we need other changes in how the training gets to tribes, how the training is done among workers, how we can work together between Indian child welfare and ASFA, how we can have lower caseloads, and how to look at individuals and not have standard, one-size-fits-all policies. Taking all these concerns into account, we can learn from each other.

Latino Families

Presenter: Elba Montalvo, Executive Director, Committee for Hispanic Children and Families, New York, New York

When I address a group like this—especially some of you whom I have seen many, many years ago, when I was very young—I think, "What can I say that's new? What can I say that you don't know already?" Then I think about times I have done training, for instance, in New York. New York is said to be so cosmopolitan, but people have asked me, "Is Barbados a Latino country?" People ask, "What language do you speak in Brazil?" Then I realize we do need to talk about Latino families. We assume that people know about us, because they're our neighbors, they're right next door. Latinos

are not new in this country. In some Southwestern states, Mexicans were there before the areas became states. The United States has a large population of Latinos, but many people don't know much about Latino families or Latinos. When you realize there are 22 Spanish-speaking countries, you realize how different we are. We share a common heritage and a common language, but many differences need to be considered when working with Latin Americans. Not that I expect all of you—or those of you who work in child welfare—to know everything there is to know about Latin Americans, but certainly you should know about the Latin American groups that you work with in your area. That is your responsibility if you are providing services to those families. Some people will say, "How am I going to know about 22 countries?" You don't have to—you only have to know about the ones with whom you work. Of course, it would be great if you knew about all of us. We are becoming a global economy and therefore have a more global perspective in this country. We know about many parts of the world, but it is a particular responsibility to know about the groups with whom one works.

I want to concentrate on who we are, how we got here, and some of the strengths of Latino families as well as the challenges for us in child welfare. As I said, we are not monolithic. I am scared that, if I talk about the general character of Latino families, people will walk out of here saying "They're like this" or "They're like that." People will leave with some stereotype, which is not my intention.

Instead, I will focus on two or three characteristics that make a big difference in how we view the world, how Americans view the world, and what you need to know as you provide services for Latino families. As I said, we immigrated here for many reasons. Most of us came for economic reasons, and some came for political reasons. We come from both ends of the spectrum. How many of you know that the Chileans who came in the 1970s came because a right-wing regime took over—with the help of the United States, I must say—and people had to leave for political reasons? Their lives were in jeopardy, and many who came here had been tortured in their country. I remember reading an article in *The New York Times* magazine about learning how to work with people who had been traumatized because they had been tortured. Cubans, however, left because of the other end of the political spectrum—a left-wing government. Thus, we come from both ends of the political spectrum. Many of us have a fear of government, and it is not because we are undocumented or are illegal aliens. Many of us have a lot of suspicion about government because of our previous experiences.

Another important thing to remember is that, in Latin America, the government does not intervene on family matters. It does not take chil-

dren away because of abuse or neglect allegations. If children were taken away because of neglect allegations, many, many children would be in the foster care system because of the poverty in some of those countries.

Next, how many of you know the relationship between Puerto Rico and the United States? It is amazing how many people still do not understand why Puerto Ricans are so Americanized compared with other Latin Americans. It is because we have been a U.S. possession. Now it is called an associated free state, and we just voted for the first woman governor.

Another issue to consider is that we are a "rainbow"—we come in all different colors. When we are dealing with the various populations, we may forget about that. Let me tell you some experiences I have had in foster care and will never forget. I was so happy when I got a Cuban family in New York to adopt some Puerto Rican girls. Then the woman called me. She was going on and on about these girls and how she was trying to make them look more White and make them act more White. I thought, "What did I do?" I had been so happy that I had found a Latino family. My point is, there are many issues of color that you need to deal with. Just because it's a Latino family doesn't mean that there are no issues of color. Yes, I believe that a Latino family is the best choice. Of course, a Latino family from the same country is a better choice. Of course, leaving the child with the extended family or a natural relative is the very best choice. If that can't happen, a Latino family is best. We do share the same language and a common heritage, but it doesn't mean you don't look at other issues. Issues of race, issues of color, and issues of economic background are very important. That is why it is important to know who the Latinos are in your state. People often think that Latinos just come here because of poverty in Latin America, but that's not true. Many middle-class and upper-class Latinos who are living in this country are interested in adopting children. It is important for you to understand what their specific backgrounds are and what issues you need to deal with, depending on their country of origin and on the children you have in the foster care system in your state.

I also want to focus on two issues related to the strengths of Latino families: the issue of individualism from the U.S. perspective and collectivism from the Latino perspective. The Latino perspective is that of a collectivist culture. What does that mean? That's the way we view how we deal with other people. Many other cultures have similar views; we are not the only ones. Certainly people in Africa, in Asia, and, I think, Native Americans have similar views. Collectivists say, "I think of all of you first. I think of my extended family, my nuclear family, and my good friends." They come first, but it doesn't mean I never think of myself. It is a very hard concept

for many Americans to understand. I live it because I was raised in this country, so I go back and forth. When you are acculturated, you walk back and forth between the two.

This is just the way we view people—we think of others first. Now what does that mean? For example, if I know a family coming from Peru with many children, and I have a three-room apartment, I will let them stay with me. Even though I am in a small apartment, and I may get into trouble for having them there, the priority is them. That view has many ramifications, however, in child welfare and foster care.

From the individualist point of view, I think of myself first. "I come first, and then I think of you." I had a hard time with that concept, because I thought Americans were selfish. I thought I was selfish, being raised in this country. Sometimes I wanted to put myself first, but that is when we make assumptions, and we judge other people by our own standards. Even in my trainings, I got caught on that one. I was being judgmental about Americans being selfish. It is a very hard concept to understand, but it is important to understand if you are working with Latino families and with other families of color who come from a collectivist culture. They do not think of themselves first, and that has all kinds of ramifications.

It is very important to understand what individualism means in this country. It means that you think an individual's well-being and personal interests are best looked after by himself or herself. With a collectivist viewpoint, we think the family will take care of the individual. What happens, then, when the family cannot? Each individual has a responsibility to care for, besides him- or herself, only the members of his immediate nuclear family. That is very different from the way we collectivists view responsibility to others.

An individual's identity is based primarily on his or her own attributes, not the attributes of his or her group. On the other hand, many times when people of color have received national attention or have received honors, they say, "This is representative of my people or my country." One would never say, "I did it, I worked hard for it. I won this award."

An individual has a right to privacy with respect to space, time, things, ideas, and relationships. How many of you come from areas where there are migrant workers? Think about their living situation. Many people live in one space, in one apartment. If you go into a home situation as a child protection worker, there may be a lot of people, a lot of things going on. That is very disconcerting to someone with an individualist perspective who is very focused and has a hard time with many things going on simultaneously.

What are the challenges? Here are some important considerations when working with Latino families. Remember that we are all different, with

varied life experience, economic status, class, educational background, and race. That is very important.

I forgot to mention earlier that sometimes you hear Latinos say, "Oh no, I'm white." I used to say "Oh yeah?" Where I come from, in Puerto Rico, there is a lot of mixture. Although I may look White, my sister doesn't look so White. We are all very mixed in the Caribbean. When you go to Argentina, or you deal with Cubans whose parents all came from Spain or wherever, perhaps their roots are not as mixed. In the Caribbean, or Colombia, or Peru, you get a mixture of Natives and Spanish and other Europeans. It is important to remember not to assume that they are being prejudiced and don't want to admit that they have some people of color in their background. Maybe they do or do not have that prejudice. If you are doing a home study, it is important to assess what the point of view really is.

Remember that people acculturate and assimilate at different rates. Some values may be accepted or rejected, retained or discarded by different members of the family. My mother acculturated to this country much faster than my father did. She was very happy. She was working, she had money. In Puerto Rico, she was living in the home and dependent on him. Here she had friends, she was out of the house, she was happy to be in the United States. She did not want to go back to Puerto Rico, whereas my father wanted to take everybody back to Puerto Rico. He wanted to have things the way they used to be, when he was the unquestioned boss.

Remember that many conflicts happen with acculturation. Because my father wanted to go back to the way things were, there were many conflicts. He would say to my mother, "Who do you think you are?" Just because she had some money, there were all kinds of conflicts.

As Dr. Hill noted, it is also important to remember the strengths. Most Latino families do not come to the attention of child welfare. Most Latino families do a good job of raising their kids—despite many problems and having to deal with culture shock, moving to this country, and economic problems. When you work with families that do come under report, remember that they acculturate at different rates. My sister and I had the same two parents, but right at this moment my sister may be home serving her husband coffee. When I come home tonight, my husband may have my dinner ready. Remember that we acculturate at different rates, even if we are siblings in the same family.

When we immigrate, some role reversals occur, and this is very important for child welfare. I wrote to the Commissioner in New York, and I received a letter saying that they do not use kids as translators, but I know that they do. New York has some Latino workers, but not enough. Last

summer, I read an article that said some workers in Utah complained that they use children as translators in investigations. Can you imagine what it does to the family to have a child translating for the parents and for the worker about the abuse that is occurring in that home? And yet it happens.

Regarding ASFA and the time frames, do people know what a qualified immigrant is? Or an unqualified immigrant? If you are working in a state that has many new immigrants, do you know the laws about what immigrants are or are not entitled to? That makes a difference for you in getting those services to them quickly. We talk about "front-end" services. If you don't get services to them as quickly as possible, if you don't have bilingual services for them as quickly as possible, then 12 months down the road, you may have to move toward terminating parental rights. What are we doing? How are we providing better services for these families than they had before we got involved?

Real-Life Observations

Presenter: Angelia, Jane Addams Hull House Association, Neighbor to Neighbor Program, Chicago, Illinois

My name is Angelia, and I am the mother of four beautiful children. I am also a grateful recovering addict. I can say this because if it had not been for a caring and loving case manager and the Neighbor to Neighbor (NTN) Hull House Association, I would not be standing before you. I will tell you a little bit of where I came from. I'm a firm believer that what comes from the heart reaches the heart.

When I first came to the NTN program, I was helpless, hopeless, and homeless. I had low self-esteem, and I didn't trust anybody. On the first day I met with all the members who would be helping me on my journey to recovery. First, they got together and introduced themselves, and they told me what part they would be playing in my life and what I would need to do to get my children back. The main thing that stood out to me—and still does—is that they all said that whenever I am feeling overwhelmed, please let them know. That made me feel a little more comfortable. The next step was allowing me to meet with the foster mom one week after she had the kids. I thought that was very nice of them. That also gave us a chance to develop a working relationship. She was very supportive while I was in treatment. She would call and make periodic visits, and that made me feel worthwhile. My case manager was also very supportive. She would visit with me while I was in treatment, and if I needed anything, she would try to make it possible for me

to have it. We developed a relationship based on trust. When I saw her trying to reach out to me, I began trying to do whatever services they wanted. As a result, I have completed intensive inpatient treatment, intensive outpatient treatment, and two parenting classes. I also have a job as a janitor and an apartment. And all this is because the people of the NTN program believed in me even when I did not believe in myself. They saw something in me that I could not see. For all that, I am truly grateful.

Enough about me. Let me share what I think about agencies in general. When you get involved with a case, try to be very cautious with the birthmother. Try to show her that you really care about what is happening to her. When birthmothers come to you, they already have very low self-esteem. They have no trust in themselves or you or the program. They truly believe that you have taken their children away from them, and it is your fault. If someone shows them a glimpse of hope—that everything is going to be all right, that you will be taking this journey together, and that you truly do care about what is happening with them—then you will open up a door for them. You just might get better results. I believe that if you get the birthmother and foster mother together early on, they may try to develop a relationship. I also believe that once the birthmother and foster mother get together, they will try to develop a strategy for both of them in dealing with the children so that neither one will be manipulated by the children. If the foster mother shows genuine concern about the birthmother and the children, you will not have as many problems. If the relationship between the birthmother and foster mother becomes stronger, that boosts the birthmother's self-esteem. Maybe, just maybe, she will want to try to continue with the services that were suggested by the agency. I also believe that it helps if the case manager puts forth a little effort and shows genuine concern about the case and does not treat it like it's just another case. If this happens, the relationship between birthmother and case manager becomes strong, as long as both parties are willing to stay in frequent contact.

I believe that the results will probably be better the more the agency keeps the birthmother informed about all aspects of the case, and if the agency is not really demanding toward the birthmother, just making suggestions. If the agency lets the birthmother be a full participant in decisionmaking about the children, about herself, and about the services, results may be good. These policies also may help you move cases forward, whereas if you do not at least suggest some of these things, you may continue what you have always had—prolonged cases.

Don't get me wrong, it has not been a bed of roses for me or the agency. I did not want to do any of these things in the beginning, but one person—

a case manager—showed genuine concern. She put up with so much stuff from me—my yelling at her, being resistant, and being close-minded. She believed that I needed help in other areas. I kept saying I didn't, but I did. She would wait a few days, call me back, and make the same suggestion. The majority of the time, I would do it and find out that it was not so bad. For instance, in one situation, I was trying to deal with too many things, and I felt that NTN was asking too much from me. I was all out of whack, and the foster mom noticed and talked with me about it. The foster mom, her husband, my case manager, and I met and talked about my schedule. We tried to work out something so that I would not be so overwhelmed. I cried a little and shared with them that this was all new to me; I was afraid, and I truly needed their help and support.

Right at the beginning, I was even upset with the foster mother. Once, the children came to me and said the foster mom had punished all of them for what one had done. I immediately became very upset with her and contacted my case manager. She got in touch with another member on my team. We met and brought the matter to the foster mother's attention. She explained what happened and the reason for punishing everyone. After hearing what really happened and asking the children again for the complete truth, I was satisfied. I apologized to the foster mother, but if I had not done this in the proper way, I probably would be still angry. Basically, I'm saying that, as long as two people can come together, we can resolve any issue that may come up and then move on.

In closing, I want to demonstrate that the NTN staff truly does care and thus allows me to put more effort into trying to help myself and the children. As an active member of a 12-step program, I attend meetings every day. I go to my former drug treatment center and try to give some hope to ladies who believe no one cares. I chair a meeting, and I am very active in other areas of the 12-step program. I try to give back something that was so freely given to me.

These things I have presented should be proof enough that a program that shares together and cares together, stays together. This program is working for me and could work for many others. If you will try some of the things that I have suggested, with the help of the NTN program or any agency with the same type of program, I am sure you can succeed.

Postscript

Angelia continues to work hard at maintaining the new life she has created for herself and her children. Angelia was able to secure a four-bedroom home from Section VIII, and she has maintained the same job since June

2000. Her four children gradually returned home to her in the summer of 2001, and have adjusted well to returning home. They are progressing well in school and are involved in afterschool activities. Angelia's oldest daughter made the honor roll, and her son's story was chosen by a young writer's organization for publication.

Hull House's NTN program continued to monitor and be involved with Angelia's family for nine months. Angelia continues to participate in individual therapy as well as family therapy with her children and her new husband, whom she married in the summer of 2001. The foster caregiver still maintains a close relationship with Angelia and her children, providing respite to Angelia whenever she needs it. Angelia continues to follow her 12-step program and has been clean and sober for over two years. She has given back to others by speaking at various 12-step program events and meetings. On February 20, 2002, the juvenile court successfully closed Angelia's case.

The Adoption and Safe Families Act: Intent, Major Provisions, Promises, and Concerns

Summary

Presenter: MaryLee Allen, Director, Child Welfare and Mental Health, Children's Defense Fund, Washington, DC

Some of us have been working at this for a long time—others bring new energy to the cause. We have heard from some wonderful firsthand experiences from heroes and heroines, like Angelia and Mr. Perez. I really do believe that, by working together, we can make the child welfare system work for children and families.

Later, we will address some of the specific challenges the Adoption and Safe Families Act creates for children of color and their families. I have been asked to lay some groundwork for that discussion by doing three things:

- Take you back to 1996 and 1997 to set the stage for the passage of ASFA;
- Review the goals and themes that were consistent throughout the debate and passage of ASFA; and
- Highlight some of the questions we need to answer, as ASFA begins to be implemented across the country, if we are to increase the opportunities for ASFA to have positive impacts on children and families.

Setting the Stage

First, let's step back a few years to set the stage. For some of you, this will be a familiar journey.

In 1996, advocates for children and families across the country had just successfully defeated a legislative proposal to put all the federal child welfare programs in block grants. That proposal, originally made at the same time as welfare reform, would have repealed the federal entitlement to foster care and adoption assistance, along with the core protections in these programs, as well as the Family Preservation and Support Services Program and a variety of other service programs. A strong case was made during that debate on block grants that the child welfare system was in crisis and that federal oversight of child welfare was needed. Congress decided program management could not devolve to the states. Policymakers and advocates had serious concerns about the capability of public child welfare agencies to protect children and provide necessary services. The child welfare system was in crisis, and more needed to be done to ensure that children were kept safe in permanent families and that families were supported.

In the aftermath of welfare reform, several different strands of activity moved forward independently and set the stage for ASFA.

- *Congressional charges that the reasonable efforts provision in current law jeopardizes children's safety and permanence.* Both the House and Senate had paid attention to threats posed to children by the "reasonable efforts" requirements in the Adoption Assistance and Child Welfare Act. Senator Mike DeWine, from Ohio, spoke on the Senate floor in the midst of the welfare debate about the misinterpretations of "reasonable efforts" that kept children bouncing in and out of care and denied children permanent homes. The House Subcommittee on Human Resources held a hearing on reasonable efforts as a barrier to adoption. News accounts of families underscored these claims. Children were moved in and out of care with no semblance of permanence.

- *A desire to move from a defensive to an offensive approach to child welfare reform.* Congressional leaders, like the late Senator John Chafee of Rhode Island and Senator John D. Rockefeller IV of West Virginia, who had fought hard to defeat the child protection block grant, were tired of playing only defense. They wanted to take affirmative steps to make improvements for children and families in the child welfare system.

- *The President's Adoption 2002 proclamation.* In a December 1996 radio address, President Clinton committed the administration to doubling

the number of children in foster care who would be adopted by the year 2002. Members of the administration and Congress were outraged about the more than 100,000 children, more than half of whom were children of color, who had a plan for adoption but were stuck in the system.

These activities set the stage for a variety of bipartisan child welfare reform proposals to be introduced in the House and the Senate in 1997: the House-passed Adoption Promotion Act; the SAFE Act in the Senate and the PASS Act; and then, in the closing days of Congress, ASFA. In reviewing the debate around ASFA, I recall that the major struggles focused on three questions—three questions that we need to continue to focus on today and in the future:

1. Could safety and permanence really be achieved by the remedies being proposed—the expedited timetables for permanency hearings and initiating termination of parental rights (TPR)? Many of us felt they could not. If the 18-month permanency hearings in current law were not being complied with, what made it likely that the same work could be done in 12 or 15 months? It is important to remember that advocates were trying to expand these timelines and, in the end, provide exceptions in individual cases to the requirement that proceedings be initiated to terminate parental rights. There were efforts, too, to ensure preservation of the "reasonable efforts" requirements in the current law to prevent placement and reunify families.

2. Was there sufficient capacity within the courts and agencies to comply with the new timetables in ASFA and ensure that the rights of both children and parents could be maintained? Many of us believed there was not. One concern was that accelerated timelines without increased services could jeopardize children's safety. Another concern was that children would be rushed home or pushed into adoption without the support necessary to ensure that they did not bounce back into care. Many members of Congress and advocates restated their belief that children should be reunified with their families wherever this was safe and possible. Proposals were put forth to significantly increase funding for substance abuse and mental health treatment and increase support for women victimized by domestic violence, but these proposals failed. The case was not made. Other proposals were made to increase funding for the courts, but they were not enacted either. The case was not successfully made. In the end, several exceptions were added to the TPR requirements. One exception was that TPR should not be initiated if the services in the child's case

plan have not been provided. The Family Preservation and Support Services Program also was reauthorized (with a new name), and funding was increased somewhat, but no other new investments in services were made.

3. What were likely to be the unintended consequences of ASFA? Despite much talk about "legal orphans" and "adoption disruptions," in fact, few data were available to support or deny such concerns. We knew that courts already had children waiting who had been freed for adoption but were not yet in adoptive families, but no one could or would produce the numbers to support these claims.

Therefore, just three years ago, on November 19, 1997, ASFA was enacted. ASFA amended (but did not replace) the Adoption Assistance and Child Welfare Act of 1980.

The Goals of ASFA

Next, what were the goals of ASFA? Members of Congress, the administration, and many others were in agreement about the goals. It is important to keep these goals in mind, because there are many ways to translate them in individual cases. The goals are broad—safety, permanence, and well-being.

Safety

The health and safety of children must be paramount. ASFA continued the reasonable efforts requirements from the current law. It required that reasonable efforts be made to prevent placement and reunify families. (I want to emphasize that, because it is a fact that often gets lost.) But ASFA went further and specified in statute, for the first time, examples of situations in which a court could decide that reasonable efforts are not required. New safety checks also were imposed on foster and adoptive parents. ASFA required that states implement criminal record checks for foster and adoptive parents.

Permanence

Clearly, the more than 100,000 children waiting for adoption—more than one-half of them children of color—were very much on the minds of those pushing for ASFA. The law discusses making reasonable efforts to reunify children with their families and to move children toward permanence as well. The permanency options specified include placements with a fit and willing relative, with a legal guardian, or in another planned permanent living arrangement, as well as adoption, but it is adoption that clearly has received the attention. The expedited timetables for permanency hearings

and for initiating TPR are key to adoption, but again, the law has often been misinterpreted. ASFA does not require that parental rights be terminated at 15 months. It requires that, unless certain exceptions apply, proceedings to terminate must be initiated. It is the court, however, that ultimately will decide whether it is in the child's best interest to proceed with TPR. States are also provided fiscal incentives for increasing their adoptions. Bonuses are provided when states increase their adoption over a prior year baseline, but only for the number of children adopted beyond that prior year's level. Efforts were made to expand those bonuses for other types of permanency options, but these efforts were unsuccessful.

Well-Being

Although ASFA itself does not refer directly to well-being, it has come to be associated with the goal of well-being—even though the new federal outcomes do not address well-being. ASFA provided for increased emphasis on child outcomes and expanded provisions to enhance capacity and accountability for how children were doing. Were they safe, in permanent homes, and improving generally? Most significantly, perhaps, ASFA promoted two activities that will help us monitor what is happening to children and families who come to the attention of the system. It required the establishment of outcomes. *Child Welfare Outcomes 1998* begins to lay a baseline for assessing state progress in seven areas related to safety and permanence. A timetable for the Child and Family Service Reviews has also been announced since ASFA. The first 17 states will have their reviews in 2001. The reviews will measure state conformity with the requirements in the Adoption Assistance and Child Welfare Act and ASFA. We must be sure that all of us and others concerned about the disparate impact of ASFA are at the table as those reviews begin. We should take steps to ensure that both the outcomes and the program reviews help to demonstrate the impact of ASFA on children and families of color.

What Next?

ASFA is now the law. It is being implemented federally and in more than 45 states across the country. What steps must we take to be sure it is implemented in ways that will help, not hurt, children and families, specifically children and families of color? Most states have passed laws to conform to ASFA, and these have now been approved by the U.S. Department of Health and Human Services (HHS). For all these states, the ASFA time clock is now ticking.

What do we know about implementation? We could spend a whole session, a whole day, or a whole conference focusing on ASFA implementation. The fact is, however, we know little as yet—nationally, or even in indi-

vidual states—about the impact of ASFA. Some groundwork has been laid by HHS. The General Accounting Office (GAO) also reviewed early ASFA implementation at the end of 1999. The GAO report is included in the notebooks for this meeting, but we need to know much more. We all have our stories, and I hope we will have time over the next two days to share these stories of real children and families. It will take stories, anecdotes, and more for states and communities to obtain the resources and supports necessary to help give children and families what they need.

What questions do we need to answer? I think they fall into three clusters.

1. What do we know about ASFA implementation and how children of color are faring?

    - How many children have been moved to permanent homes since ASFA was passed and to what types of homes? How many have returned home, gone permanently to relatives, or been adopted? How many are in planned permanent living arrangements, and who are these children?

    - What steps are under way to monitor permanent placements to ensure they are permanent? What sorts of postpermanency supports are being provided—not just for children who are adopted but those who are returned home or with kin?

    - What is being done to promote the goals of safety and permanence at the front door of the system (for example, expanded services, new ways to involve family and community, and improvements in visitation)?

    - What do we know about the status of cases and ages of children where TPR petitions were filed? How many children are still waiting for TPR? Or for adoptive families post-TPR? How many cases are on appeal? What were the bases for these appeals?

    - How are TPR exceptions being applied? Who decides which cases will be exempted? What tracking is being done? How are the exceptions being used in the cases of children who are with relatives and in families with alcohol and drug problems?

    - What new opportunities has ASFA created? As Children's Defense Fund staff have talked to staff involved in family group conferencing and some of the community partnerships around the country, staff

have stressed the importance of helping parents understand the urgency for both getting help and reaching out to extended family and the community for help.

- What do families and communities know about ASFA? If we are to build on the strengths of families and communities, we must make sure they are all involved.

In all these areas, we need numbers, and we need to know what the numbers mean.

2. What may be some of the unintended consequences of ASFA—consequences that are likely to have a disproportionate effect on children and families of color? What has caused these consequences? Again, in answering this question, it is important to be able to back it up with numbers. Over the past several months, when talking with agency staff and attorneys representing children, parents, and agencies, I have heard about several unintended consequences.

   - A number are related to the belief that the push for adoption in ASFA is preempting appropriate attention to what is best for the child. In some cases, reunification is receiving insufficient attention, and parental rights are being terminated too soon. In others, foster parents and kin are being asked to consider adoption too soon without adequate preparation. Some are being scared off.

   - According to some reports, children are returned home too soon because agencies felt the pressure for adoption and knew this was not the best plan in a particular case.

   - Concerns are voiced repeatedly about the negative impact of ASFA on siblings. Siblings are being separated as agencies struggle to increase their numbers of adoptions.

   - Some states are concerned that the new criminal background checks, in some instances more stringent than the federal law, are preventing families of color from caring for kin.

   - In some instances, parents are hesitant to go for help (and other service providers are concerned about referring them to child welfare) out of concern that such a referral will result in their losing their children.

   - Concerns have increased about the disproportionately negative impact ASFA is having on children and families of color and on

families in need of substance abuse treatment or struggling with domestic violence.

- Several pieces have been written as well about the effect ASFA is having on parents in prison.

3. Finally, what can we do to ensure permanence for the children who had already been in care for 15 months when ASFA was passed and now have been in care for at least 51 months? This is the group of children who are stuck in the system and who prompted the expedited timelines in ASFA.

   - ASFA required states to review and develop permanent plans for these children—yet too many of them continue to sit. Many of these are not children for whom the debate is "Should they go home or be adopted?" The question instead is "Will they be adopted, or placed permanently with kin, or will they grow up as wards of the state?"

   - We must encourage states to know who these children are, what their plans for permanent placement are, and what more the states need to do to move these children to permanency and to keep them there. ASFA has stimulated many important innovations, but they are scattered across the country. Therefore, we do not know what their combined effect could be if these innovations were brought together in states and communities.

   - When states know who needs permanent placements, of what kind, and what it would take to get these children there—then we should help the states achieve those goals. How many children are with foster parents who want to adopt and have been there for 51 months? What special initiatives might help move these waiting children to permanence? Not only will this benefit the children already in care, but, by reducing the numbers of children in care, it will also increase the likelihood of more appropriate responses when children enter care in the future.

A focus on this group of waiting children does not mean that we can forget about children entering care today, tomorrow, and in the future. Quite the contrary. We also must focus on increasing supports for the children just entering care and, by reducing the number of waiting children, increase the likelihood that these children will get what they need.

Finally, as we work to assess the effect of ASFA on children and families of color, we must:

- Address the issues that were raised when ASFA was being considered and also continue to look at ASFA in the context of changes being made in the welfare system;
- Remember that the goals of safety, permanence, and well-being are ones that we want for all children, including children of color;
- Pay attention to the implementation of ASFA, work to gather data that answer specific questions, and provide what we need to know to make mid-course corrections; and
- Focus our attention both on the front and back ends of the child welfare system. We must see ASFA as an opportunity to get into permanent families the children who already have been in care much too long. ASFA also presents an opportunity to get families and children the services and treatment they need to keep them out of the system when they first come to its attention. We already know that these issues will be on the agenda in this next Congress. The Child Protection and Alcohol and Drug Partnership Act was introduced in both the House and Senate this year to get alcohol and drug treatment to children and families who come to the attention of the child welfare system. It will be reintroduced in 2001 and has major implications for children and families of color. Other proposals being considered would also significantly expand resources for front-end services.

We have heard about the challenges ASFA creates for children and families of color, and I look forward to working together to begin developing solutions to those challenges. The challenges are great, but so are the opportunities. The time is now.

Summary

Presenter: Dorothy Roberts, Professor, Northwestern University School of Law, Chicago, Illinois

Professor Roberts focused her remarks on the climate of the ASFA debates and the potential impact of ASFA on families and children of color in the child welfare system. She addressed the following issues:

- ASFA legislation is creating concerns for families of color.
- This legislation is viewed as a dramatic change in federal child welfare policy.

- Much of the discussion of ASFA is a series of misinterpretations.
- There is concern that children of color will become legal orphans.
- Adoption is viewed as a means of ending problems with foster care.
- Much more data and evaluation are needed regarding the outcomes of this legislation.

ASFA is a dramatic change in federal policy. It grew out of horror stories about children who returned home and were killed. *The Book of David* by Richard J. Gelles was cited by several legislators. The flaws of the child welfare system were continually highlighted in testimony. Debate focused on family preservation versus the protection of children.

ASFA made children's safety the paramount concern. Family preservation was no longer the main concern. In fact, biological bonds were described in negative terms. Transcripts mention biological ties as dangerous and harmful to children. Adoption was referred to as a safer alternative than returning children home.

The Adoption 2002 initiative generated much press. No similar energy was applied to a campaign for family preservation.

Reasonable efforts was an unclear term initially, and it remains so under ASFA. Most clarifications of the reasonable efforts standard cite keeping children safe, but do not mention an intent to keep children with families or to reunite children with families.

The concept of concurrent planning is seen as a conflict of interest. It sets up a false competition between foster, adoptive, and birthfamilies. More data are needed on how caseworkers are implementing concurrent planning. Another major concern is the interpretation of ASFA and how the legislation is being explained to caseworkers.

The legislation seems to be based on the faulty idea that requiring TPR to occur sooner will solve the problem of foster care. Will adoption reduce the number of children in care or will TPR create more legal orphans? This possible trend needs to be watched carefully.

The situation remains that more children of color will enter the child welfare system, yet they remain the least likely to be returned home or adopted. Children of color have the greatest risk of becoming legal orphans. Black children experience the highest rate of child poverty. Services are not available at the front end. The system waits for an emergency. By that time, the situation has deteriorated to the point that placement is necessary. Legislative policies that do not focus on services will negatively affect children of color.

The passage of MEPA and IEPA legislation makes race connected to ASFA. During the testimony on ASFA, race matching and adoption delays were mentioned together. The idea seemed to be that children would be adopted sooner if social workers did not hold out for a family of color for children of color.

An area for future research is the relationship between ASFA and welfare reform. Through welfare reform, Congress eliminated the safety net for poor children. We are asking families to correct problems without the services or incomes to do so. This will have a major effect on the families who find themselves in both systems.

The basic question to be answered is "Why do Black children enter the child welfare system in numbers disproportionate to other children?" ASFA may result in losing focus on the issue of why children are entering the system.

Concurrent Working Sessions on Key Service Areas and Provisions of ASFA

This forum's working sessions were designed to focus in depth on key service areas and provisions of ASFA that may affect—either positively or negatively—children and families of color. The charge to the groups was as follows:

1. Examine early observations and findings—based on both research and practice—specific to the service area.
2. Discuss implementation challenges and successes.
3. Share examples of effective policies, programs, and practices.
4. Develop recommendations for researchers, policymakers, agency administrators, the courts, HHS, CWLA, and other national organizations for each service area.

The group summaries that follow include comments by individual participants as well as recommendations of the whole working group. Working group topics include:

- Front-Loading Services
- Kinship Care
- Adoption
- Youth in Care

Front-Loading Services Working Group

Early Observations and Findings

Minnesota Overview

Presenter: Patricia Torres Ray, Coordinator, Children of Color Initiative, Minnesota Department of Human Services, St. Paul, Minnesota

Ms. Torres Ray provided an overview of Minnesota statistics regarding children in care.

RACE	PERCENTAGE OF POPULATION	SERVED BY SYSTEM
African American	*4.0%*	*21.0%**
American Indian	*1.8%*	*11.0%*
Asian/Pacific	*3.9%*	*1.8%*
Hispanic	**	*5.9%*
White	*87.0%*	*59.0%*

NOTES:

* State statistics show that African American children in Minnesota are eight times more likely to enter foster care than in any other place in the United States. A move to Minnesota places an African American child at risk of being placed away from the family.

** The statistical counting of Hispanic children began only five years ago in Minnesota. No earlier data are available.

Implementation Successes and Challenges

Supporting and Strengthening Families

Presenter: Ruth McRoy, Director, Center for Social Work Research, School of Social Work, University of Texas at Austin, Austin, Texas

In Austin, Texas, IEPA and MEPA affect social work practice more than anything else. Dr. McRoy spoke on the issues related to supporting and strengthening families.

Poverty, sexual abuse, the criminal justice system, and funding streams that support out-of-home care are the issues that have had the most impact on children and families of color. Poverty is seen as the central issue.

A differential offering of foster care exists for African American children. Kinship care in Austin, Texas, is primarily African American grandmothers caring for children. Kinship families are not receiving adequate funding or services to support the children as traditional foster parents do. A two-tiered system of child welfare services is thus created. Concerns remain about placement with relatives. The idea persists that dysfunctional families are raising children.

Communities struggle with several issues related to ASFA:

- Today, 1.3 million parents struggle with the problem of illicit drug abuse, yet treatment services are limited. The services that do exist do not last long enough to treat parents adequately so that they can remain sober.
- Approximately 840,00 state and federal inmates need treatment for sexual abuse, yet only 150,000 receive it.

Effective Policies, Programs, and Practices

Promising Programs in Texas

Presenter: Ruth McRoy

- Transitional living programs for pregnant teens and preteens have resulted from the Foster Care Independence Act.
- Model postadoption services include provision of respite care, community involvement in recruitment and support, and training for workers about diversity.

Examination of the service needs that result after adoption can lead to an evaluation of front-end services. What services would benefit birthfamilies? Are these different from postadoption services?

More is needed in the way of services for reunification. Examples of Texas programs that facilitate reunification include:

- Drug courts
- Mediation services (all parties are present at one table to facilitate timely decisionmaking)
- Court Appointed Special Advocates (CASAs) who take on a larger role initially with the case and aid in the decisionmaking process

Speaker's Recommendations

- Family preservation should be viewed as part of the continuum of services for families.
- An adequate assessment that focuses on strengths is needed.
- Comprehensive and long-term services are needed.
- Interventions should be based on social work theory and the family's culture by:
  - — Adapting services to incorporate the rich culture and heritage of families.
  - — Supporting existing networks in African American families.
  - — Linking with African American churches.
- Family specific services are needed that:
  - — Provide concrete services such as food and clothing, not just counseling services.
  - — Provide the same services to birthfamilies that foster families receive.
- Longitudinal research is needed. We have not followed families on a long-term basis, but this information would be beneficial in determining service outcomes.

Discussion

A birthparent who was attending the session commented that, in her experience, the needed services are available; however, when parents are ad-

dicted, they cannot see beyond the addiction. Consistent and persistent advocacy by social workers is needed to reach out to birthfamilies.

A foster parent who was attending the session commented that services and supports of all types are often difficult to access, for both birth- and foster parents. For example, information about licensing for foster homes is very difficult to obtain. Family preservation services can only be accessed when a family is in crisis. Services are needed to prevent crises.

Children of Color Outreach Initiative

Presenter: Patricia Torres Ray

The Children of Color Outreach Initiative (CCOI) was created in 1996 by the Minnesota Department of Human Services in response to community concerns about the disproportionate number of children of color in out-of-home placement. The main goals of CCOI are to build meaningful relationships with communities of color and the Indian community, to create effective strategies to decrease the number of children of color in out-of-home care, and to increase the participation of families of color in systems of support.

Child Neglect Study

One of the strategies that CCOI developed to address the proportion of children of color in child welfare was to form a collaborative partnership between the University of Minnesota, three major county social services agencies, and the Department of Human Services to conduct research in the area of neglect. The goals of the project are to increase understanding of the scope of neglect among children of color and to seek accurate information to influence policies and programs that affect children of color in child welfare systems. The study, funded by the National Institutes of Health, will determine whether racial disproportionality can be explained by any one or more forms of bias that may arise when cases are processed through the child protection system. The study will examine:

- *Reporting bias.* People report some groups more than others.
- *Substantiation bias.* Substantiation rates are unequal for the same cases.
- *Labeling bias.* Prior determination occurs.
- *Exposure bias.* More is known about families who are exposed to more than one system.
- *Aggregation bias.* Bias results from combining all of the above factors.

Cultural Competency Guidelines

CCOI also developed *Cultural Competency Guidelines* to increase cultural competency among child welfare and children's mental health services providers. The guidelines provide a definition of cultural competency, define a purpose for developing guidelines, and focus on the following organizational and professional aspects: governance and administration, organizational values, organizational culture, policies and procedures, staffing, marketing and community relations, supervision, and services delivery.

The In-Home Safety Services Program

Presenter: Denise Revels Robinson, Director, Bureau of Milwaukee Child Welfare, Wisconsin Department of Health and Family Services, Milwaukee, Wisconsin

Ms. Robinson explained that, as a result of a lawsuit by the American Civil Liberties Union, the state of Wisconsin took over the county-administered system.

The goal of the program is to prevent out-of-home placement while maintaining safety. The program stabilizes families by using linkages to formal and informal natural helpers, assists families in accessing services, and encourages families to access and use resources to maintain safety.

Referrals come directly from child protective services (CPS) to an In-Home Safety Services provider. Cases are referred to providers by the ZIP code of the birthfamily's residence. Because these are voluntary services, there is no court involvement. Once a referral is made to the program, the family's case is closed to the child welfare system.

Program Highlights

Within 24 hours of a child being referred to the program, the worker must complete a safety assessment and plan to determine what services are needed to keep the child safe. Seven days after the original referral, everyone involved in the case gets together. The CPS worker comes to say goodbye to the family. The family and providers talk about the accessibility and appropriateness of services. Everyone clarifies what steps are necessary. Nineteen core services may be provided to families. Agency partners, who are located in each of the five areas of the district, are paid $4,800 for the life of the case. The flat rate of payment for four months allows flexibility to tailor and individualize services to the needs of the families.

The safety plan is reassessed weekly, and services can be added or deleted as needed. Every three weeks, providers come together without

the family for discussion of the case. Service needs addressed by the program include sexual abuse (40%) and mental health.

All workers also receive cross-system training, leading to development of one coordinated plan. One document lists all the services the family will receive.

Program Benefits

Important benefits of the program include flexible, nontraditional hours, full disclosure, and services that are wrapped around the needs of individual families. Agency contracts must focus more on skills, flexibility, compassion, experience with in-home crisis services, availability to families, and putting the family's service needs at the center of the provision of services. Caseloads range from one to eight families per worker. No stigma is attached to families who have been involved in this program. In addition, the "safety services" are not viewed as threatening, as many traditional CPS may be. At the end of formal services, a celebration includes CPS workers, providers, and family members. This occasion allows parents to tell their story and to share what has made a difference in their lives. Program outcomes demonstrate a 5% recidivism rate for families who have completed the program.

Program Barriers

The barriers within the program include:

- Workers need to think differently about their role with families.
- Families need to place their trust in the agency providing safety services.
- Service providers in the network have to provide services within 24 hours of the referral.

These barriers are being addressed by all parties.

Working Group Recommendations

The group developed the following recommendations for front-loading of services:

- Incorporate cultural competence (self-assessment, training of staff).
- Acknowledge racism and sexism.
- Develop guidelines on why front-loading of services is important.

- Develop a system of preventive services.
- Use a family-centered approach.
- Create financial incentives for keeping families together.
- Change "reasonable" to "active" efforts.
- Ensure representation from communities of color.
- Make information more readily available.
- Strengthen services, making them available/accessible.
- Partner with substance abuse treatment programs.
- Use a strengths-based, community-based approach.
- Incorporate universal services.
- Find ways to divert children once they enter the system, to keep children safely at home.
- Find more ways to link child welfare and Temporary Assistance for Needy Families (TANF).

Four Priority Recommendations

The group selected the following four recommendations as priorities and suggested that these activities occur concurrently:

1. Systemic changes are needed. These changes should be inclusive of families and communities, address biases, as well as consider and address the philosophical dimension of this work.
2. Legislative advocacy is needed. Provide relevant data and findings in terms that elected officials will understand. Include outcomes and evaluations; demonstrate cost savings.
3. Prevention should be increased in both range and depth, including nontraditional and informal methods.
4. Training is required at the university level, including preparation that addresses all of the "isms" of cultural competency.

Kinship Care Working Group

Early Observations and Findings

- The group noted that kinship care came into being because of the lack of foster homes. It is actually a form of family preservation.
- The group said a nationally recognized definition of kinship care is needed.
- Kinship care is not kinship foster care. In kinship care, the family drives the case. In foster care, the system does.

Findings from the Subsidized Guardianship Waiver Demonstration Project for Kinship Care in Illinois

Presenter: Mark Testa, PhD, Director of Research, Illinois Department of Children and Family Services, Chicago, Illinois

Kinship care has numerous benefits.

- Kinship placements are closer to the child's home and allow sibling relationships to be maintained.
- Attachments are closer, and the children feel more loved. Kinship placements are less likely to be disruptive, and they facilitate work with the birthfamily.

Concerns and myths exist about kinship care placements. Some concerns are that kinship placements do not provide a safe environment for the child and present a greater risk than foster care placements. The study found, however, that the children felt safer with their relatives.

Money is another concern because of the conversion of TANF dollars to kinship foster care programs. The study found no indication of an increase in "child only" cases. A group participant suggested that a guardianship subsidy is needed that is parallel to the adoption subsidy.

Discussion

Question: Which relatives are adopting?

Answer: Children who are younger and have been raised in the home since birth are more likely to be adopted by their relatives. Aunts and uncles are more likely to adopt, whereas grandmothers usually chose guardianship. The age of the child is usually the guiding principle for families.

Question: What does Illinois do about relatives who do not want to be involved with the Department of Children and Families?

Answer: Extended family support services have a three-month limit. The services include emergency beds, clothes, and Medicaid. The family can apply for a "child only" grant. Dr. Testa suggested that the amount of the TANF benefit be increased from $102 to about $252, because a licensed foster parent gets $350. There should not be competition between birthfamilies and kinship families.

Question: What is needed to make a stronger pitch for financial benefits for kin?

Answer: The argument is related to the perception of the family, because we have not argued successfully against the notion that "the apple does not fall far from the tree." Dr. Testa stated that the issue of generational abuse is less likely to be true than the introduction of drugs into the family. Good people in the family are able to provide for their kin's children when necessary.

Kinship care is not fully accepted in the child welfare system, and the system talks about it in the context of kinship foster care. The system has tried to fit kin into the foster care system. Kinship offers connectedness for children across their life span.

Speaker Recommendations

- Subsidized guardianship should be a permanent part of the Social Security Act/Title IV-E.
- Guardianship and preference in placements should be given to preexisting kinship arrangements if they meet relevant standards.
- Training is needed on the integration of ICWA and ASFA.

Implementation Successes and Challenges

Implementing ASFA and ICWA

Presenter: Lucille Echohawk, Indian Child Welfare Specialist, Casey Family Programs, Denver, Colorado

Ms. Echohawk briefly reviewed Native Americans' history of forced assimilation.

ASFA does not supersede ICWA. More than 550 tribes exist and have many different languages. About 50% of all Native people do not live on reservations. Members of about 20 tribes live in the Chicago area alone.

Native people see things in terms of history and seven generations hence; this view is a weighty responsibility. Children are seen as part of a family, not as individuals. Tribalism is a pervasive cultural attitude or interactional style that emphasizes the prime roles of the extended family and kinship relations more than individualism.

TPR and Indian Child Welfare

Presenter: Terry L. Cross, Executive Director, National Indian Child Welfare Association, Portland, Oregon

The notion of TPR is unnatural to Native Americans. TPR was derived from an English common law based on children as property. Mr. Cross asked, "How can we undo what the Creator has done, on the basis of ownership of children and not looking at expanding a child's resources?"

We have not achieved permanency if it does not exist within the mind of the child. We are hindered because we cannot think outside of the box. In 1968, child welfare experts claimed success in removing and saving Indian children. At the time ICWA was passed, one in four Native American children were in out-of-home care. In 1985, 902 were placed with non-Indian families. Indian child welfare advocates are struggling with states that think ASFA supersedes ICWA.

Mr. Cross recommended training for all child welfare staff about both ICWA and the cultural issues related to Native Americans.

Permanency and Kinship Care

Presenter: Mal Williams, Executive Director, Azusa Family Services, Chicago, Illinois

Mr. Williams stressed the importance of subsidized guardianship. The child welfare system, set up for foster care, not kinship care, assumes a totally different mindset. Why terminate parental rights if children are living with relatives?

legislation was intended for care by nonrelatives, not for care by relatives.

Permanency is a feeling, not a law. Examine what the child wants and needs as well as the family's commitments. Permanent foster care with kin is all right if it is stable.

Advice From a Kinship Caregiver

Presenter: Demetra Morris, Kinship Care Parent, Hull House Association, Chicago, Illinois

Question: What advice do you have for us?

Answer: Be there for the children. Kin who care for children need housing. An assessment should be done to determine the level of care needed for the child. NTN has been helpful to me. This model should be used in other places. Churches could be involved in knowing what the issues are and providing some help to caregivers in the community.

ASFA and Principles of Exemplary Kinship Care Practice

Presenter: James Gleeson, PhD, ACSW, Associate Professor, Jane Addams College of Social Work, University of Illinois at Chicago, Chicago, Illinois

The outline of Dr. Gleeson's presentation follows.

I. A broad view of family offers resources for the child.

   A. Barriers.

      1. Exclusive focus on the caregiver and child.

      2. "Family" defined by legal system.

      3. Limits on the number of people to be included in the assessment, service planning, implementation, and evaluation of the service plan.

   B. Facilitating conditions.

      1. Expanded view of family—extended and augmented.

      2. "Family" defined by family.

      3. Broadening the number of people who can participate in ensuring the safety, permanency, and well-being of the children.

II. Ongoing striving for cultural competence.

A. Barriers.

1. Inability to identify cultural strengths.
2. Personal biases of caseworkers, supervisors, attorneys, judges, case reviewers, and other decisionmakers.
3. Mistaking strengths for weaknesses.
4. Nuclear family assessment models.
5. A focus on pathology.

B. Facilitating conditions.

1. Ability to identify cultural strengths.
2. Fascination with learning about the patterns of caregiving and the problem-solving histories of families over time.
3. Knowledge of and ability to apply assessment frameworks that apply to various family forms (e.g., leadership, harmony, and balance).

III. Collaboration in decisionmaking. (Who decides?)

A. Barriers.

1. Caseworkers, judges, formal service providers, case reviewers viewed as the decisionmakers.
2. Rigid time frames and lack of caseworker creativity and advocacy.
3. Urgently working *on* the family to close the case.
4. Intimidating, coercing, and marketing specific permanency options.

B. Facilitating conditions.

1. Viewing family members as decisionmakers.
2. Having a sense of urgency on the part of the caseworker in engaging families in assessment, planning, implementation, and decisionmaking.
3. Working *with* families to ensure child safety, permanency, and well-being.

4. Negotiating and facilitating informed decisionmaking.

IV. A long-term view of child rearing.

A. Barriers.

1. A goal that is limited to a change in case status (e.g., reunification, adoption, guardianship).

2. Motivations that are limited to meeting targets of performance-based contracts.

3. Ecological blindness (lack of attention to community supports).

B. Facilitating conditions.

1. Having a goal of ensuring safety, permanency, and child and family well-being 5 to 10 years in the future.

2. Building the case management capacities of kinship networks.

3. Building community systems of support for kinship families.

Effective Policies, Programs, and Practices

1. Hold family case conferences (meetings).

2. Use a model court; hold a special review of kin cases.

3. Conduct an intensive search for relatives within 60 days.

4. Evaluate how risk-assessment tools work with kin; decrease heavy reliance on risk-assessment tools; and examine risk assessment versus needs assessment.

5. Communicate that all kinship families have healthy as well as unhealthy aspects/qualities; build on the strengths of the family.

6. Develop legal policies that do not require TPR but protect the stability of placements.

7. Encourage partnerships between the community and the agency working with kin.

8. Use consistent language as it relates to kinship care. It is confusing to use foster care language for kinship care services.

Working Group Recommendations

Recommendations to Researchers

- Research varied rates of payment to kinship parents. (Payments equal to foster care rates promote stability and are cost-effective.)
- Conduct research on whether services were adequately provided to parents who have terminated parental rights. Is TPR used appropriately?
- Use 2000 Census data to highlight kinship issues.
- Conduct research on the effectiveness of kin programs.

Recommendations to Legislators

- Build on strengths of ASFA and TANF by recommending:
  - — Title IV-E funding of subsidized guardianship; and
  - — Open Title IV-E funding to relatives who meet relevant child protection standards.

Recommendations to HHS

- Use a clear and consistent definition of kinship care.
- Support equal access to Title IV-E entitlements for tribes.
- Use Title IV-E funds to provide:
  - — Respite care in family reunification as a temporary support and as extended family support; and
  - — Incentives for family preservation and reunification.
- Develop a policy mandate to make birthparents a priority for receiving substance abuse, mental health, and housing services.

Recommendations to Universities

- Include kinship care in child welfare courses.
- Conduct more research in these areas.

Recommentations to CWLA and Other National Organizations

- Keep the discussion alive (as a "hot button" priority).
- Maintain diversity among presenters on kinship care issues.
- Support subsidized guardianship as a permanent part of the Social Security Act/Title IV-E.

Adoption Working Group

Presenters for this working group included Valerie P. Lane, Esq., Attorney at Law, Dallas, TX; Zena Oglesby, Executive Director, Institute for Black Parenting, Inglewood, CA; and Toni Oliver, Adoption Chief, District of Columbia Child and Family Services, Washington, DC. Their presentations and the perspectives and recommendations of the working group are summarized below.

Early Observations and Findings

Available Data

Existing adoption data for families and children of color are problematic. Anecdotal information indicates minority families are applying to be adoptive parents but are being screened out; however, no reliable data confirm this concern. We know that families are coming forward to adopt, we lose them, and we do not know where we are losing them in the process. The available adoption data are misleading, are sometimes confusing, and are often taken from conflicting sources.

One member of the group stated that the research on numbers of adoptions seems to be based on preconceived hypotheses. For instance, studies on transracial adoptions do not look at culture, only at numbers. Another person commented that, in Washington, DC, the 63 adoptions finalized in 1999 reflected a dramatic increase over the previous two years, yet there is no good baseline by which to measure progress. Data are missing; despite their limitations, however, the available data are used to make policy decisions.

One person felt that ASFA is bad legislation, but people have said that the intent was good.

Other comments included:

- In America, we have been conditioned to place children in a permanent arrangement away from their families. We do not understand poverty. It is not race, but poverty, that brings children into care. We tend to look for what is not there when we go into the home. People who live in poverty are not necessarily poor in all ways.

- American Indians occupy a unique political status within this country. As Indian Nations, they operate through government-to-government relations. Native Americans have specific rights, yet people do not understand ICWA. The problems with available adoption data regarding American Indians are based on the fact that fewer valid data are available about Indians than about other groups. Almost all the available data are inaccurate, misleading, undercounted, and misidentified. Not all Native Americans look like "Tonto," and not all tribes look alike. Another problem is that most people do not understand Native American culture and traditions. For example, adoption and foster care are not consistent with the values and culture of most Native Americans.

  ICWA, passed in 1978, mandates that states maintain a registry of Native children who have been adopted. This list is to be made available to the Secretary of the Department of the Interior. Only the state of Illinois is in compliance with this requirement. In addition, American Indians are undercounted because of their biracial status. They are often lumped together with the Hispanic population. We do know, however, that the 565 tribal nations include at least 1.5 million people. No standardized data collection system exists for ICWA. No money has been allocated to collect the missing information. Of every 1,000 Indian children, 12 are placed in out-of-home care—more than any other minority. Concern was expressed that, although ICWA was passed in 1978, no documented effort has focused on state implementation, unlike the ongoing implementation efforts regarding ASFA.

- In Texas, of the children who are free for adoption and who have been in care for five or more years, 80% are Hispanic (5% higher than overall representation in the local population). It is predicted that Hispanics will be the single largest minority group in the nation by the year 2020. Today, 28% of Texas residents are Hispanic. It is predicted that by 2030 about one-half the Texas population will be Hispanic.

  In California, 63% of all school children are Hispanic, and 22% of the children in the child welfare system are Hispanic. In some sections of

the state, 80% of the children in care are Hispanic, yet no single agency, adoption or otherwise, addresses the growing Hispanic population in care. The Hispanic population is significantly affected by ASFA.

- An alarming trend in many states is that legislation is being proposed that would not allow single parents to adopt. This is a veiled effort to eliminate adoptive parents with alternate lifestyles. Single parents are extremely important to child welfare adoption. One-third of White children and two-thirds of African American children are adopted by single parents.

- Although African American children are 17% of the national population of children, they comprise 50% of the national child welfare population. In Washington, DC, African Americans are 99% of the child welfare population.

- We need to be mindful that Congress often reacts to private adoption interests, creating policy that subsequently applies to all types of adoptions. To have a better sense of trends that may affect us, we need to know more about all types of adoption, not only adoption related to child welfare services. At present, there are no reporting requirements for all types of adoption (e.g., private/independent, private agency, stepparent, facilitated/brokered).

- Before ASFA, the number of adoptive placements was already increasing in many states. Federal legislation may not have been needed to mandate the increase.

Data/Information Needed

The group considered the following questions:

- What happens to the children who are available for adoption and to the families who apply to adopt?

- How do we know if adoption is right for the child?

To know the answers, we need the following information:

- The number of adoption disruptions/dissolutions, particularly in transracial adoptions.

- The number of disruptions/dissolutions when children reach adolescence.

- Information regarding each state's recruitment plan for minority par-

ents, as mandated in MEPA and as included in their Title IV-B state plan. What type of monitoring is occurring concerning these plans?

- Placement rates by race. (Available data show trends by age, sex, race, and siblings, but not the placement rate.)
- Information regarding the families who apply for adoption. Information is needed on those who are screened out and on those who drop out.
- What is happening with petitions for TPR? Does TPR increase the number of adoptions or only the probability of adoptions? Are TPRs and the number of adoptions increasing at the same rate? How many new "legal orphans" have we created?
- How many children are being reconnected with their birthfamilies even if parental rights have been terminated? How many of them have special needs? And what are the needs of the children who were previously available for adoption and then returned to their families?
- How many children and youth who are in residential care are available for adoption? What are their characteristics?

Summary of Early Observations

- More emphasis, training, and understanding are needed on family preservation versus adoption, particularly in relation to cultural differences for families and children of color.
- Biases exist in reporting. Clarification is needed between what is factual and what is anecdotal regarding adoption data and information on families and children of color.
- Prevention services are needed.
- Explore interpretation and implementation of postadoption services for families and children of color.
- Prepare young people currently in the system for adoptive placement. Such preparation should include the youth's specific individual issues regarding being a child of color.
- Funding dictates practice. The adoption incentive process accelerated and emphasized only one type of permanency for children: adoption. Other options for permanency are needed for children of color.

Implementation Successes and Challenges

The group viewed the success of ASFA as limited. The question was asked, "How do we define success?" For instance, a Kentucky drug court that increased reunifications defined success by the number of children who were returned home. In another state, however, a drug court claimed success based on the number of TPRs that were achieved. We need to recommend the same model of success for use by all of the states. Could we call it success if families receive services so that children can remain connected to them? Should we consider it a success if parents of children in long-term foster care have their rights terminated?

The number of adoptions has increased, although some negativity is related to the adoption incentive payments. Some see these payments as payment to the states for work they should already be doing. ASFA has given the courts some guidance to terminate rights of parents who have been given "too many chances." ASFA has also encouraged concurrent planning; however, concurrent planning is sometimes viewed as pitting foster parents, adoptive parents, and birthparents against each other.

Successful strategies identified by the group included:

- Family group conferencing, which is in use in almost all states.
- Wisconsin's In-Home Safety Services Program.
- Giving families options, specifically around openness in adoption, such as the work of the Navajo Nation.

Other successful strategies include:

- Continuing current national and state research efforts;
- Increasing recruitment of adoptive families, and increasing public, private, and community partnerships;
- Recognizing the importance of kinship connections and family strengths, and giving more attention to diversity.

Challenges mentioned included:

- Poor practices, such as threatening a relative or foster parent with removal of the child unless the person proceeds to adopt.
- The lack of understanding by field staff of the culture and of the needs of children and families.
- A lack of education and training concerning ASFA and ICWA.

The Need to Integrate ASFA and ICWA

The group identified additional challenges, including:

- Addressing "isms," such as racism.
- Developing new approaches to finding permanency for children of color.
- Continuing needed research and data collection as well as finding the funding for it.
- Providing children and families of color with services that are available and accessible.
- Reducing the number of children of color who enter out-of-home care.

Effective Policies, Programs, and Practices

The group mentioned several other effective programs and practices in addition to family group conferencing and the successful strategies discussed above. These programs were the Texas Court Mediation Model and church involvement in east Texas rural adoption recruitment, and the Neglect Study Project and Cultural Competency Initiative in Minnesota. (Contact information for these programs is listed at the end of this monograph.)

Working Group Recommendations

The group formulated the following recommendations:

Statement: ASFA amended the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) rather than replacing it.

Suggestion: Develop an overlay of the two laws to identify the changes to P.L. 96-272.

Statement: ICWA was passed in 1978.

Suggestion: Training and enforcement of ICWA.

Statement: Native American and African American foster and adoptive homes are needed.

Suggestion: Emphasize recruitment and retention of Native American and African American adoptive families.

Statement: Families and children of color need preventive and postadoption services.

Suggestion: Emphasize preventive and postadoption services for families and children of color.

Statement: ASFA provides for adoption incentives.

Suggestion: Financial incentives should be made available to the states for reunification and other permanency options in addition to adoption.

Statement: Extended family and kinship placements are appropriate permanency options for children of color.

Suggestion: Emphasize extended family and kinship ties as resources for children.

Statement: There is a fear that ASFA is creating legal orphans through the TPR process.

Suggestion: A closer examination of the TPR process—both initially and later—is needed.

Statement: It is thought that adoptive families of color are being screened out.

Suggestion: Research is needed concerning the reasons families of color drop out or are screened out of the process.

Statement: Older children of color who are available for adoption are not ready for adulthood.

Suggestion: Develop options for children and youth who are not adopted—teens and preteens—and ways to prepare them for adulthood.

Statement: More information is needed concerning the children who are adopted and who are not adopted.

Suggestion: Research is needed for greater understanding of the children in long-term foster care. Why do they remain in care? How do we increase adoptive placements for youth who are 11 to 16 years of age?

Statement: The community, staff, and caregivers need training on ICWA, ASFA, and cultural competency.

Suggestion: Mandated content on foster care, adoption, and reunification should be included in staff in-service training and in university-level social work courses. Mandatory training is also needed concerning cultural competence and ICWA (full compliance).

Statement: ASFA was developed with the intent to promote adoption.

Suggestion: Draft proposed legislation and a funding proposal with the intent to keep children out of foster care.

Four Priority Recommendations

The group selected the following four issues as priority recommendations:

- Provide training in universities, in agencies, and through in-service training programs on ICWA compliance, cultural competence, and information on foster care and adoption.
- Draft a legislative/funding proposal directed toward reducing the number of children coming into care.
- Draft legislation establishing financial incentives for reunification, permanent placements for children over age 8, and other forms of permanency in addition to adoption.
- Develop an overlay of ASFA and P.L. 96-272 to further understanding regarding the two laws, their intent, and their requirements.

Youth-in-Care Working Group

Presenters for this working group included Rodnisha and Tyisha, youth in foster care, Chicago, IL; Terry Harrak, CWLA Youth Development Project Coordinator, Washington, DC; Chester Jackson, Associate Director, You Gotta Believe, Pittsburgh, PA; Alfred Perez, Student, Ann Arbor, MI; and Linda Washington, Program Manager, Lawrence Hall Youth Services, Chicago, IL. Their presentations and the perspectives and recommendations of the working group are summarized below.

Early Observations and Findings

- There is a lack of respect as well as a lack of culturally competent and development-focused services.
- What do outcomes really mean? How do we interpret data?
- How do we engage youth and families so they are involved as equal and competent partners?
- Resources are lacking.
- Important issues are TPR and the lack of appropriate permanency plans for youth.

Data Needed

Data are needed on youth returning home:

- How many youth return home after they leave care?
- How long are they staying at home?
- Are parents accomplishing their goals?

- If there is a lack of placements for youth, how many additional placement resources are needed?

Outcomes are complicated:

- How are we following young people over time?
- How can data capture this information?

Discussion

Some participants in the working group felt that one cannot formally make or force connections. Relationships happen naturally, yet participants felt that group homes are run in a manner contradictory to this observation. Youth need exposure to people in the community, in school, and in faith-based organizations. These group participants asked, "How can these relationships be encouraged, given the fundamental structure of group homes?"

People working with youth need to build on the healthy relationships that the young people have in their lives. It is not realistic to try to force relationships.

Implementation Successes and Challenges

- Services are not forced on young people without regard to naturally occurring relationships (i.e., mentoring).
- Young people are given a role in determining their own lives. Ask young persons questions and listen to what they say and want.
- The concept of interdependence is included. The mind-set that young people will be completely independent at 18 years of age is unrealistic.
- Families are permanent, so youth are helped to develop skills by having relationships with families.
- Young people are helped and supported to work through and understand their past.
- The privacy of young people is respected.
- Foster youth are treated as equal members of the family.
- Foster caregivers are professionalized and receive a salary in addition to the board rate.

Effective Policies, Programs, and Practices

Presenter: Linda Washington, Program Manager, Lawrence Hall Youth Services, Chicago, Illinois

In completing youths' social histories, consider and identify the significant people in their lives. Ask who the youth are as individuals. What are their needs and strengths? Ask the youth—they are a part of everything that happens. Make sure that people sitting at the table are prepared to work with the youth. Involve each youth, but also include major players in the life of each youth.

Discussion

Effective policies, programs, and practices include the following components:

- Constant communication and contact with youth.
- Stress on the importance of building relationships.
- Flexibility.
- Emphasis on education and career/vocational supports and services.

Working Group Recommendations

Overarching Theme: You Gotta Believe!

Believe in a vision that makes youth a priority in our country in policy, programs, communities, and practice.

1. A shift in perspective is needed so that respect and relationships are paramount for youth. Professionals working with youth should look at the strengths of the family and support systems.
2. The concept of permanency and pre- and postpermanency supports should be expanded.
3. The complexity of outcomes should be addressed:
   - What are we tracking and why?
   - How do we determine outcomes?
   - How do we maintain reliable data?
   - How do we interpret the data?

- How do we coordinate between systems?
- What do the outcomes look like for children, youth, and families of color?
- Demand the data.
- What questions do we want answered and why?

4. Communities of color should be engaged.

Summary, Conclusion, and Final Notes

Summary and Conclusion

In this first opportunity to hold a national discussion on ASFA and its impact on children and families of color, participants expressed a range of concerns, observations, cautions, and hopes regarding the implementation of this important legislation. Forum participants shared some quantitative data, considerable practice information, and programmatic examples from diverse jurisdictions across the country as they sought to describe how this law is being implemented and how it is affecting children and families of color.

Clearly, quantitative information specific to ASFA implementation was limited. Where data were available, it was difficult to conclude that ASFA alone was responsible for a particular result. Nevertheless, some important trends were noted and the results of specific, evaluated initiatives were shared. These early observations and findings informed the overall discussion regarding how to best ensure the safety, permanence, and well-being of children and families of color in this country.

Core Questions

Briefly, the forum participants responded to 14 core questions as follows.

1. *Do the concerns some child welfare practitioners and advocates are expressing about ASFA reflect current experience with ASFA or earlier, more generalized experience? Is there any quantitative evidence that families of color are being affected differen ly, either positively or negatively?*

Participants expressed concern regarding the availability and reliability of quantitative data in assessing the effects of ASFA on children and families

of color. Problems were reported with definitions, the inputting of data, and data collection. Participants in the Adoption Working Group expressed concerns that available adoption data are misleading, confusing, and often taken from conflicting sources.

Several groups mentioned the lack of information on American Indian children, because of incomplete reporting, the failure to identify American Indian children, and the lack of capacity and resources among tribal social services to collect this data. Although ICWA mandates that states maintain a registry of Indian children who have been adopted, only one state is in compliance with this requirement, and no standardized system exists for collection of data related to ICWA. In addition, it is difficult to assess the status of Hispanic children in child welfare because good baseline data are lacking.

Another concern involves the multiple effects of related legislation and initiatives and the difficulty of determining cause and effect in this context. For example, President Clinton's 2002 Adoption Initiative challenged states to double the number of children in foster care who would be adopted by the year 2002. Many states were already making special efforts to move waiting children to adoption before the enactment and implementation of ASFA. In addition, the work requirements of the Personal Responsibility and Work Opportunity Reconciliation Act have placed significant new demands on families of color and—potentially—created greater risk for these families as they attempt to make their way in the workplace while providing care and protection for their children. The impact of TANF on children and families of color was viewed as inconclusive, but the impact is a major force that cannot be separated entirely from ASFA. MEPA and ICWA also intertwine with ASFA. The group's perspective on these interconnections is discussed below.

For all groups, the problems with information, data, and the difficulty in discerning the differential effects of ASFA were overshadowed by information regarding the continued overrepresentation of children of color in the child welfare system:

- In Minnesota, for example, African American and American Indian children are greatly overrepresented in the child welfare system.
- As reported in the Adoption Working Group, African American children comprise 50% of the national child welfare population, yet only 17% of the national population of children.
- In Texas, 80% of the children who are free for adoption and have been in care for five or more years are Hispanic.

Although sufficient quantitative evidence is lacking regarding the specific impact of ASFA on children and families of color, their persistent overrepresentation in child welfare suggests that—at a minimum—ASFA has yet to sufficiently stem the tide of children of color entering the system, nor has it sufficiently facilitated their exit from the system.

2. *Is there qualitative evidence of differential effects, seen in a pattern of reports and anecdotes?*

Participants reported many situations in which the requirements of ASFA were affecting children and families of color. These effects were viewed as differential, because children and families of color are more likely to become involved in the child welfare system as a result of poverty, lack of supports and services, racism, and other factors. The discussion included several key themes:

- The permanency timelines defined by ASFA were of concern to the participants. For parents of color who are battling addiction, 12 months may be needed just to access adequate substance abuse treatment services. Because of ASFA requirements, workers may pressure parents to take children back even if the parents are not yet ready, or else face the possibility of TPR (see Brave, p. 10).

- ASFA's strong focus on legal permanency, particularly in terms of adoption, conflicts with views that are central to African American, American Indian, and Hispanic cultures. Participants described how formal adoption is often considered unnecessary or a bad thing because it is viewed as ignoring the primacy of family and cultural ties. For example, American Indians believe that you are always part of your family; you can never terminate your parents (see Brave, p. 9; Hill, p. 5; and Kinship Care Working Group, p. 47).

- The narrow view of "family," as defined in ASFA, does not sufficiently accommodate kinship care as a valued resource for children and families. ASFA allows for exemptions from certain requirements for children in kinship care; otherwise, kinship care is relatively invisible in the law. Some poor practices have resulted, such as pressuring kinship caregivers to adopt their relative children.

The Kinship Care Working Group expressed concerns that myths continue to exist about kinship care. Relatives are regarded with suspicion, because of the assumption that children are not safe with their kin. Yet the kinship bond is a strength of families of color and is central to the child's

growth and development. Kinship placements allow children to maintain family ties, including sibling relationships. Some participants felt that ASFA had negatively affected sibling relationships, because some agencies are separating siblings to increase the numbers of adoptions.

Finally, participants shared a number of initiatives that suggest that, within the context of ASFA, some good work is being done in behalf of children and families of color. These initiatives are referenced later in this section.

3. *Are the mandates of ASFA understood and implemented evenly throughout the United States?*

This question was not addressed directly by forum participants; their comments suggest, however, that states and local jurisdictions have interpreted and implemented the law differently. Some states have focused on ensuring permanency for children in kinship care. Others have focused on reducing the backlog of children waiting for adoption. Others have attempted to provide more intensive, comprehensive services at the front end of the system.

At the state level, the emphasis may be on one or more of these aspects. At the local level, however, the emphasis may be quite different. For example, individual judges may insist upon certain case outcomes for children and families in their court, regardless of the priorities of the state child welfare system. Tribal judges may be reluctant to grant TPR because many tribes do not believe in adoption, although they do believe in permanency through guardianship or kinship.

Participants reported on best practices or promising practices as well as what was considered "poor practice." "Poor practice" examples included:

- In some cases, the attention is focused on adoption rather than reunification, and parental rights are terminated too quickly. In other cases, children are returned home too quickly because agencies feel the pressure for adoption, although the agencies know this is not the best plan for the children (see Allen, p. 29).

- Kinship caregivers may be pressured to adopt, even when they feel uncomfortable with this option. Participants felt that adoption should be pursued with kinship families, along with reunification and guardianship, as long as one option is not presented as a forced choice and family members are provided support and assistance for all options.

- Examples of best practices and poor practices can be found in many jurisdictions throughout the country. Poor practice occurs for many

reasons, including hasty or narrow interpretation of the law and policy. The groups shared strategies for addressing these practice gaps. Nevertheless, participants worried that these approaches, while important, felt piecemeal and inadequate to the task of improving the ability of the child welfare system to implement ASFA wisely and well. "Best" or "promising" practices and approaches, as identified by participants and presenters, are described in response to Question 12, below.

4. *How do agencies understand and implement related mandates, and how do these affect the process guided by ASFA implementation for children and families of color?*

The impact of ASFA and its connection to "related mandates" were discussed several times during the forum. For instance, some states and agencies assume that ASFA supersedes ICWA; therefore, they ignore important ICWA requirements. Instead, ASFA complements ICWA. Participants underscored the need for training whole agencies and individual workers on both laws and on how they can be integrated in practice.

MEPA and IEPA require states to diligently recruit potential foster and adoptive families who reflect the ethnic and racial diversity of children who are living in the state and in need of foster and adoptive homes. The Adoption Working Group reported that, in some parts of the country, families of color are applying to be adoptive parents but are being screened out, often for technical reasons. Agencies need assistance in determining when certain requirements can be waived—including help with modifying licensing requirements, when necessary—to increase the number of families of color who are available to adopt waiting children.

5. *Are prevention and support services being made available to the families reported to CPS and to families whose children are in care?*

The working groups uniformly stressed that children and families of color are not provided with sufficient preventive and supportive services. The Front-Loading Services Working Group recommended that prevention services be increased in range and in depth and that these services include nontraditional and informal methods. These recommendations are described more fully in response to Question 11, below.

The group also recommended changing "reasonable" efforts to "active" efforts and developing guidelines on the importance of making intensive, comprehensive services available to families early in their involvement with the child welfare system.

The Adoption Working Group concluded that more emphasis, training, and understanding are needed that relate to family preservation, versus

adoption, particularly in relation to cultural differences for families and children of color. In addition, postadoption services, which are preventive in nature, are greatly needed. The group felt that the strong emphasis on adoption has highlighted one aspect of permanency for children and that other options for permanency—including family preservation, reunification, and guardianship—must be equally emphasized.

6. *Are the services families receive appropriate to their needs?*

Considerable discussion throughout the forum concerned the lack of fit between families of color and the services that they receive. Particular attention was given to the difficulty of accessing gender-specific substance abuse treatment and appropriate mental health services. Participants suggested that some of the difficulty may lie with the tendency of workers to have a one-size-fits-all approach. Workers may recommend the same services for every family, regardless of their needs, and rely heavily on traditional, formal services, even when informal supports are more available and appropriate.

The Youth-in-Care Group expressed serious concerns about the failure of many programs to employ a strengths-based approach to youth development. If youth are not involved in key aspects of the planning and delivery of services, agencies miss many opportunities to enlist youth in finding solutions that work for them (see also points discussed under Question 7, below).

7. *Are services beginning promptly and are they maintained long enough to address family needs and to produce lasting change?*

Participants spoke frequently about the rush to return children to families who are battling substance abuse or mental health conditions. The worry is that parents are being reunited with their children too quickly—before the adults are well on their way to recovery and have had a chance to build competence and confidence as parents. Participants also noted both the rush to move children to adoption and the many parents who could benefit from additional services that are not available to them due to funding, eligibility, distance, or other factors.

8. *Are services appropriate for all the families who need them? Are workers available who speak clients' languages and understand their cultural contexts?*

Participants reported numerous concerns regarding the availability of culturally appropriate services, including:

- Bilingual services are not sufficiently available for Latino families as well as other cultural groups for whom English is not the primary

language. Trained bilingual workers are in short supply in many parts of the country.

- Child welfare workers may not know what services immigrant families are entitled to receive.

- Data shared in the Adoption Working Group revealed that, in some sections of California, 80% of the children in care are Hispanic, but not even one agency specifically addresses the growing Hispanic population in care.

To prepare and support workers in providing culturally responsive services, the Front-Loading Services Working Group recommended that cultural competence be incorporated in agency training as well as in university-level curriculum.

9. *What services not provided by child welfare agencies, such as advocacy and legal representation, are most essential for families of color? Are families who need them receiving these complementary services?*

Concerns noted included:

- Treatment for substance abuse problems continues to be in short supply and is not sufficiently gender- or culture-specific. Without it, many families cannot make the changes needed to achieve a safe and stable reunification.

- Twelve-step programs are a critical support for many parents, but they are not available or accessible in all communities.

- Legal services for birthparents are not sufficient. Birthparents are often unprepared to deal with the legal aspects of ASFA, especially the required TPR filing after 22 months.

- Kinship caregivers may be similarly unfamiliar with the legal requirements and lack information about all of the permanency options available to them.

- Compared with traditional foster parents, kinship caregivers often are not provided with adequate funding or services to support the children in their care.

10. *Is the increased use of kinship care creating a separate set of expectations and outcomes for children of color? If so, are these beneficial or detrimental?*

This specific question was not discussed, but all groups stressed the importance of family and kinship for children's healthy growth and development, including:

- The need to look first to kin, including paternal family members, as a resource for children when they cannot remain safely with their birth-families;
- The importance of keeping siblings together; and
- The value placed on informal as well as formal forms of permanency, especially in cultures or communities where formal adoption is viewed negatively, so long as continuity and support can be reasonably assured.

Participants in this discussion had very positive expectations about outcomes for children of color who are involved in kinship care. Participants would recommend similar expectations and outcomes for all children for whom kin is a resource.

11. What steps must be taken to ensure that families of color are helped and not harmed by their contact with the system?

Participants urged using a strengths-based, family-centered approach to support and strengthen families as well as to protect children. They stressed the importance of the following steps:

- Acknowledge and address racism.
- Identify and build on the family's culture by:
  - — Adapting services to incorporate the rich culture and heritage of families;
  - — Supporting existing networks in families; and
  - — Linking with faith-based organizations.
- Provide family-specific services, including:
  - — Concrete services, such as food and clothing (not just counseling), and
  - — The same services for birth- and kinship families that are provided to foster families.
- Make systemic changes to be more inclusive of families and communities, including examining and addressing policies that unnecessarily

limit the eligibility of family members to serve as a resource for children and youth.

- View family preservation as a continuum that includes placement prevention, reunification, and support to kinship and adoptive families.
- Conduct an adequate and accurate assessment that focuses on child and family strengths as well as needs and challenges.
- Give placement preference to preexisting kinship arrangements, as long as the child is safe.
- Conduct intensive searches for relatives within the first 60 days of a child's placement in care.
- Provide training on ICWA as well as on the integration of ICWA and ASFA.

12. What promising program approaches have emerged as states and localities implemented ASFA?

Promising approaches, in general, were described as those that:

- Place greater emphasis on the services needed to prevent families from entering the child welfare system in the first place, e.g., approaches such as Wisconsin's In-Home Safety Services Program.
- Carry the preventive focus through the continuum of services, including providing increased postadoption support and services.
- View family members as decisionmakers and use inclusive decisionmaking approaches, such as family group conferencing.
- Engage the family in the assessment, service planning, implementation, and evaluation of the success of the service plan.
- Identify and build on the strengths of natural leaders (including youth and families served), and community leaders and workers (who may be serving as a bridge to the community), so that these leaders can be supported and empowered in their efforts.
- Ensure constant communication and contact with youth.
- Pay increasing attention to reunification, e.g., Texas uses mediation services and CASAs to facilitate reunification.

- Work creatively with other key systems, e.g., developing a model court to hold special review of kin cases.
- Develop options for teens and preteens who are not adopted, as well as ways to help them achieve permanent family connections and prepare for adulthood.
- Look for new ways to support families and achieve permanency for children, e.g., the Navajo Nation's family options approach and Illinois' subsidized guardianship demonstration project.

13. *What policy changes must be made at the national, state, and local levels before these steps can be taken?*

Key recommendations included:

- Create a national response to concerns about the disproportionate numbers of children of color in out-of-home care. As an example, the Minnesota Department of Human Services' Child of Color Outreach Initiative developed guidelines to increase cultural competency among child welfare and children's mental health services providers.
- Make available to the states financial incentives for reunification and other permanency options in addition to adoption.
- Develop a policy mandate to make birthparents a priority for receiving substance abuse, mental health, and housing services.
- Develop legal policies that maintain stability and promote permanency without routinely requiring the filing of a petition for TPR.
- Make subsidized guardianship a permanent part of the Social Security Act/Title IV-E.
- Support tribes' equal access to Title IV-E entitlements.

14. *What additional questions must be asked to inform this exploration?*

The group proposed the following questions for further inquiry and study:

- Have adequate services been provided to parents whose rights have been terminated? Is TPR used appropriately? Does the increased use of TPR increase the number of adoptions?
- What more can we learn about the children who remain in long-term care? Who are they and why do they remain in care?

- What is the relative effectiveness of kinship care programs?
- What are the various rates of payment to kinship parents?
- What happens to children who are available for adoption and to families who apply to adopt? Information is needed on families who are screened out or who drop out.
- How many adoptions result in disruption or dissolution, particularly those involving transracial placement and children who have reached adolescence?
- How many states have submitted recruitment plans for minority parents, as required by MEPA, and what do the plans include?
- What are adoptive placement rates by race?
- How many children and youth are being reconnected with their birth-families, even if parents' rights were terminated?
- How many youth return home after leaving care, and how long do they stay at home?
- How are young people being followed over time?

At the conclusion of the forum, spokespersons for each working group presented recommendations for improving the child welfare policies, programs, and practices that affect children and families of color. These recommendations, included in the earlier summaries of the concurrent working sessions, are incorporated in the responses to Questions 10 to13 above.

Final Notes on the Closing Session

Participants emphasized the need for a strong and sustained national focus to ensure that children and families of color are not harmed by ASFA and related laws, but are, instead, beneficiaries of sound and sensitive implementation of the act. Participants were hopeful that this diverse group of committed people—with the help of CWLA, the participating national organizations, the federal government, and the foundations—would continue to bring attention to this issue and to the need for a comprehensive approach to serving children and families of color.

The group felt that this will require an expanded view of family that encompasses:

- A recognition of kin and others who are important in a child's life,
- An appreciation for the strengths of diverse cultures, and
- A greatly strengthened commitment to providing the "up front" and ongoing supports and services that children and families need to be successful.

Individuals from diverse racial and cultural groups stated that participating in the forum was an affirming experience in several ways:

- Participants found common ground across racial and cultural perspectives, especially in their definitions of family, in their perceptions regarding the need for prevention and early intervention services, and in their desire for a broadened, but clear, agenda for safety and permanency for all children.
- Participants found agreement in the solutions, i.e., the promising policies, programs, and practices that were shared and that had applicability across program areas and diverse racial and cultural groups.

- Participants voiced a renewed commitment to finding better ways to improve the capacity of the child welfare system to implement ASFA in a culturally competent manner.

To carry the message of this forum to a broader audience, CWLA outlined its next steps:

- Publish the proceedings of the forum,
- Convene additional forums on permanency that will include a focus on children and families of color, and
- Incorporate the recommendations of the group to help to shape the national legislative agenda.

In addition to publishing and disseminating these proceedings, CWLA will convene a regional forum in California in 2001 and a national meeting in 2002. Each is designed to assist states and communities in improving permanency outcomes for children in the context of ASFA, and each will include specific discussion of "best practices" for serving children and families of color. CWLA continues to provide information and consultation to agencies and courts regarding the implementation of ASFA. Finally, CWLA continues to work toward enactment of supportive laws and funding, including supporting increased funding of the Promoting Safe and Stable Families Program and working closely with the authors and sponsors of the Act to Leave No Child Behind. This proposed legislation would greatly expand the use of Title IV-E funds for a wide variety of supports and services for families, including preventive services and financial support to kinship caregivers who elect to become guardians of their relative children.

Although these steps are important, to be effective, we ultimately must combine our efforts with those of other organizations and concerned individuals. We must reach across the land, joining with many others—from a variety of perspectives and at the national, state, and local levels—to create a national dialogue that goes beyond professional boundaries and moves from conversation to concrete action. Children and families of color deserve no less from us.

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This monograph reports the results of a Child Welfare League of America forum, *Assessing the Impact of the Adoption and Safe Families Act (ASFA) on Children and Families of Color.* Forum participants explored practitioners' concerns about the effects of ASFA on families of color. It follows presenters' discussions of ASFA in regard to African American, American Indian, and Latino families, then traces the discussions of four working groups at the forum: kinship care, adoption, youth in care, and front-loading services. These groups examined new findings in their service areas, shared effective policies and practices, and developed recommendations for researchers, policymakers, and the courts. This monograph will help readers learn about the effects of ASFA on children and families of color and improve supports and services to these families.

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